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ABSTRACT

The document serves as a directory of projects supported by the U.S. Office of Special Education in the Handicapped Children's Early Education Program (HCEEP) and provides an overview of their activities. An introduction describes the HCEEP network. The overview summarizes the activities of the five types of HCEEP projects: Demonstration, Outreach and State Implementation Grant projects, Early Childhood Research Institutes, and technical assistance centers. A third section contains project written abstracts for each of the 178 HCEEP projects. Project abstracts appear alphabetically by city and state within the five project categories; and usually include information on project staff, funding sources, objectives, features, and products. A project listing section serves as a key to all projects, alphabetically listed by state; and an index provides a guide to the projects' pertinent characteristics (e.g., handicapping conditions of children served, parent activities offered, curricula used). (SB)

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Handicapped Children's Early Education Program

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1980-81 Overview and Directory

Produced for the Office of Special Education, Division of Innovation and Development, by Technical Assistance Development System (TADS), division of the Frank Porter Graham Child Development Center, University of North Carolina at Chapel Hill and Western States Technical Assistance Resource (WESTAR), consortium of the University of Washington, Teaching Research, and the National Association of State Directors of Special Education.

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Preface

This document reflects a joint effort of the United States Office of Special Education (OSE), the Technical Assistance Development System (TADS) and the Western States Technical Assistance Resource (WESTAR). It is intended to serve as a directory of projects supported by OSE grants and contracts in the Handicapped Children's Early Education Program (HCEEP) and to provide an overview of their activities. HCEEP seeks to stimulate more and better services to young handicapped children and their families through an array of programs.

The 1980-81 HCEEP Overview and Directory contains five sections:

*The Introduction describes the HCEEP network.

*The Overview summarizes the activities of the five types of HCEEP projects: Demonstration, Outreach and State Implementation Grant projects; Early Childhood Research Institutes; and technical assistance centers.

*The Directory lists project-written abstracts for each of the 178 HCEEP projects.

*The Project Listing serves as a key to all projects, alphabetically listed by state.

*The Index provides a guide to projects' pertinent characteristics (e.g., handicapping conditions of children served, parent activities offered, curricula used).

It is hoped this document will help put the national effort of the HCEEP network into a manageable perspective for use by those directly or indirectly involved in that effort. Families may look to this book to find out who and what can help their child. Service providers may use it to collaborate with other professionals. Lawmakers, administrators and policy makers may refer to the Overview and Directory for a comprehensive, up-to-date portrait of the diverse activities their decisions may affect. Overall, the Office of Special Education, TADS and WESTAR hope the Overview and Directory will stimulate interest in the needs of America's young handicapped children and their families and further the aim of HCEEP, that is, to create more and better services for all young handicapped children.

Introduction

Jane DeWeerd, Section Chief
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In 1968, the Congress held hearings which led to the passage of legislation establishing the Handicapped Children's Early Education Program (HCEEP), sometimes called the First Chance Network. The hearings pointed to the need for locally-designed ways to serve infants, young children and their families; to gather more information on effective programs and techniques; and to distribute visible, replicable models throughout the country.

In the summary and discussion of the provisions, the drafters of the original legislation pointed out that the law, H. R. 17829, addressed the important need of providing major services to handicapped children at a very early age. Only through early intervention with tested and successful models, they affirmed, would those concerned with assisting handicapped

FIGURE I

HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAM

PURPOSE: TO ASSIST IN DEVELOPING AND IMPLEMENTING INNOVATIVE EXPERIMENTAL PROGRAMS FOR YOUNG HANDICAPPED CHILDREN (BIRTH TO EIGHT YEARS) AND THEIR FAMILIES

PROJECTS	DEMONSTRATION	OUTREACH	STATE IMPLEMENTATION	EARLY CHILDHOOD INSTITUTES	TECHNICAL ASSISTANCE CENTERS
GOALS	DEVELOPMENT OF EXEMPLARY MODELS; DEMONSTRATION AND DISSEMINATION	STIMULATION OF INCREASED AND HIGH QUALITY SERVICES	IMPLEMENTATION OF EARLY CHILDHOOD STATE PLANS	LONG TERM INVESTIGATION OF SELECTED ASPECTS OF EARLY EDUCATION FOR HANDICAPPED CHILDREN	TECHNICAL ASSISTANCE TO DEMONSTRATION PROJECTS AND STATE IMPLEMENTATION PROJECTS
ACTIVITIES	SERVICES TO CHILDREN SERVICES TO PARENTS STAFF DEVELOPMENT PROGRAM EVALUATION DEMONSTRATION AND DISSEMINATION	BROAD DISSEMINATION OF INFORMATION PRODUCT DEVELOPMENT AND DISTRIBUTION STIMULATING ADDITIONAL SERVICES TRAINING CONSULTATION STATE INVOLVEMENT AND COORDINATION	ASSESSMENT OF NEEDS TRAINING DATA COLLECTION AND ANALYSIS	RESEARCH INTO DIRECT APPLICATION OF EARLY EDUCATION PROGRAMS IN TYPICAL SETTINGS	ASSESSMENT OF NEEDS PROGRAM PLANNING EXPERT CONSULTATION EVALUATION
ELIGIBLE PARTIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES	STATE EDUCATION AGENCIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES	PUBLIC AND PRIVATE, NON-PROFIT AGENCIES
TYPE OF FUNDING	GRANT	GRANT	GRANT	CONTRACT	CONTRACT
FUNDING PERIOD	3 YEARS, ANNUAL RENEWAL	3 YEARS, ANNUAL RENEWAL	1 YEAR POTENTIAL 1 YEAR RENEWAL	5 YEARS POTENTIAL 5 YEAR RENEWAL	3 YEARS, ANNUAL RENEWAL

children be able to provide the best services. Bipartisan support for the legislation was strong and the committee's intent was clear. The subcommittee chaired by Congressman Carl Perkins of Kentucky submitted a report to the House Education and Labor Committee emphasizing that HCEEP was a model demonstration program and not a service program. In addition, the report asserted that those programs promising meaningful approaches to the education of the handicapped should be eligible for permanent legislation.

The HCEEP affords an opportunity for any public or private nonprofit organization to develop and demonstrate high quality services for a selected group of children and their families, as they think the services should be structured. It also affords an opportunity to prove the effectiveness of the locally designed approach and disseminate it anywhere in the nation to other agencies which choose to use the model rather than to invest the time and resources in developing their own program.

HCEEP began as a small program of 24 Demonstration projects. As circumstances in the field changed, HCEEP has evolved into an effort with five, major, complementary components (see Figure 1) and 172 projects. The major components are Demonstration, Technical Assistance, Outreach, State Implementation Grants, and Early Childhood Research Institutes.

Demonstration

At present there are 94 Demonstration projects sponsored by private agencies, universities, local schools, State Education Agencies and other agencies. Demonstration projects feature these components: child identification and assessment, educational/therapeutic programming for children, evaluation of child progress, active parent/family participation, inservice training, coordination with public school and other agencies, evaluation of project objectives, and demonstration and dissemination of project information. The Demonstration projects have shown initiative in forming state, regional or special interest group consortia to increase their effectiveness through joint action. They have also cooperated with a wide array of other agencies at the local, state and regional levels.

The Demonstration projects form the base for the HCEEP. They have a difficult mandate to carry out in a three-year period, but the record shows that nearly all the projects meet their objectives and many overachieve. The projects have demonstrated that many young children with handicaps are capable of making greater gains during the critically important early years than their prognoses had indicated.

Technical Assistance

The second component to be developed within HCEEP was technical assistance. Both Technical Assistance Development System (TADS) and Western States Technical Assistance Resource (WESTAR) work with Demonstration projects to develop quality programming by helping them meet their objectives and needs. These agencies have pioneered in developing procedures for the systematic delivery of technical assistance, and they are active in information dissemination. They currently work with State Implementation Grant projects as well as with Demonstration projects. A third technical assistance agency, International Business Services, Inc. (IBS), has also been funded by OSE; IBS provides special assistance to minority projects through a Minority Leadership Consortium.

Outreach

Experience with Demonstration projects has revealed that most projects have been able to obtain continuation of direct services to children and families from other sources. Many Demonstration projects have been successful in responding to requests from other agencies for help in training staff and/or initiating or improving their services, based on the project's work.

To meet such requests, a new HCEEP component, outreach, was developed. Outreach has proved to be a very cost-effective mechanism for stimulating quality services.

During the 1980-81 funding year, 49 Outreach projects are being supported. They are working to meet the two goals of outreach: to stimulate the development of high-quality services and to develop models for outreach activities. During 1980, a conference of Outreach project directors was held to share information on outreach models and to improve procedures to document the impact of outreach.

State Implementation Grants

The next component to be introduced was the State Implementation Grant (SIG). This component is designed to help State Education Agencies build their capacity to plan for the development and expansion of early intervention services for handicapped children. SIG grants are directed toward assisting states in their attempts to develop long-term, comprehensive, full-service plans for the preschool education of the handicapped. Toward this purpose, SIG grants support such activities as convening planning groups, disseminating established plans, developing preschool program standards and guidelines, and developing and supporting consortia. These grants provide administrative resources rather than direct services to children. The SIGs can assist states by making available personnel trained in early education for handicapped children who have the time to devote to needs and resource assessment, detailed planning and state level coordination of services among agencies. Twenty-four SIGs are funded in 1980-81.

Early Childhood Research Institutes

Early Childhood Research Institutes (ECRIs), a joint effort with the Research Projects Branch, are the most recent component to be developed in HCEEP. Four institutes are conducting long-term studies to add to the knowledge of such topics as social, emotional, physical, cognitive and behavioral aspects of the child; theories and methods of intervention; parent- child interaction; and assessment approaches.

Projects within these five components of HCEEP are seeking practical solutions to complex problems. The projects in each component are committed to finding better ways to work with young handicapped children and their families and to share the results of their work with others.

Evidence of Effectiveness and Impact

The original legislation which initiated the HCEEP called for evaluation of the effectiveness of the program. A contract for a third-party evaluation was awarded to the Battelle Institute of Columbus, Ohio, to assess children's progress, the status of "graduates" of the projects, parent participation and replication by other agencies. In 1975, 129 randomly selected children in 29 projects were tested and progress in the personal-social, motor, cognitive and communication domains was assessed. The Final Report showed that within all handicapping conditions children made one and one half to two times greater gains than they would have been expected to make without the benefit of the project experiences; in some cases, as with EMR children in the personal-social domain, the gains were even larger.

Parental satisfaction was also evaluated. Ninety-seven percent of parents perceived in their children positive changes or improvements which they attributed to the project. The Battelle study also looked at the placement of graduates leaving the projects, since one of the major goals of early childhood projects is to prepare children to enter regular placements whenever possible. The Battelle study found that 74 percent of the children in the sample were placed in public school settings; 64 percent of the graduates studied were in regular placement, with half of them receiving ancillary services.

One of the ways in which the impact of the program can be measured is the increase in services for young children, and one of the goals of the projects developed under this program is to obtain local, state or other non-program funds to continue the services developed during the three-year demonstration period. A survey in 1979 showed that 85 percent of the initial group of projects which had completed the three-year demonstration period had secured funds to continue the services to children and had maintained funding 10 years after the projects had begun. Further, the level of funding support had increased during that time, in some cases substantially. All 34 of the projects completing the demonstration period in June 1979 obtained funding to continue their services, despite the fact that some served infants. The Office of the Secretary of HEW tracked the extent to which the program met its objectives in 1974 and noted that for each child whose services were paid for directly in the Demonstration projects, four children were being served by other agencies through a combination of continuation of service and replication of models.

An unusually high number, 19, of the projects developed with HCEEP funding have been approved for dissemination by the Joint Dissemination Review Panel of the Department of Education on the basis of evidence of effective programming for children and information on the cost of replicating the project's services. A number of these projects have also competed for and been awarded grants from the National Diffusion Network (NDN) of the Department of Education to replicate their models within the public schools. A sub-network of NDN Special Education projects has been formed to improve the coordination and visibility of projects serving handicapped children within the NDN. Programs That Work -- Special Education, published by the Far West Laboratory, provides further information on the evidence of effectiveness and replication costs of these projects. The currently approved Joint Dissemination Review Panel projects are listed in the Index.

A survey of the results of the work of the 64 Outreach projects funded in 1977 showed that 17,500 persons visited the demonstration sites (now supported as continuations from state or local funds); 575 different products were distributed; 640 replication sites serving 18,400 children were stimulated; the 64 demonstration/continuation sites served 8,190 children and their families; 3,500 staff members were trained in the use of the model and 25,000 persons received some type of training from the Outreach projects.

Head Start is one of the agencies which has received assistance from and worked cooperatively with the HCEEP. The Seventh Annual Report to the Congress on Services to Handicapped Children contains a statement of appreciation for the valuable help provided by the HCEEP projects to Head Start in its efforts to serve handicapped children. Nine of the 15 regional Head Start Resource Access Projects are now or have been located in agencies which have sponsored HCEEP projects.

The consortia formed by the projects have had an impact on other systems. The Virginia Association of First Chance Projects has worked cooperatively with the State Department of Special Education and has developed a self-evaluation tool for preschool programs at the request of the State Director. The California Consortium assisted the SEA in drafting guidelines for early intervention services. The Rural Consortium has set up information-sharing mechanisms involving other agencies and has developed information on the special needs of rural areas. The Inter-Act Consortium of projects serving infants has developed a position paper on services to children from birth to age three and has analyzed assessment tools for infants under one year.

The projects in the HCEEP have not only demonstrated effective services for children and families, but they have developed creative and cooperative ways to share and spread what they have learned. They have demonstrated careful use of scarce resources. Many of them have shown it is possible to work well with young children and then develop new skills to work with adults in other agencies. The program as a whole has developed mechanisms so any agency in any part of the United States can have a chance to compete to develop, demonstrate and disseminate its idea of a better way to work with young children and their families.

Overview

Developed from survey information collected in 1980-81, the Overview section contains comparative data on the types and range of activities pursued by HCEEP projects. In addition, the Overview presents a summary of activities for each of the five types of HCEEP projects.

Overview

A Description of Projects Funded Under The Handicapped Children's Early Education Program

The Handicapped Children's Early Education Program supports 178 grant- and contract-supported projects throughout the United States. Through HCEEP, a federal effort is conducted which fosters diverse and innovative approaches to the education of young handicapped children. Some programs demonstrate direct services to childen and families; others provide outreach activities, conduct research, plan statewide programs or provide technical assistance. In order to show the range of activities among these programs, OSE, through WESTAR and TADS, conducted a survey of all projects funded during 1980-81. The results of this survey constitute the Overview section of this document.

Demonstration Projects

HCEEP Demonstration projects provide parents, communities and professionals with innovative models for the early education of handicapped children. The projects are located in rural areas and in the inner city, in small towns and in suburban communities; the children are from diverse social, ethnic and economic backgrounds. During 1980-81, 100 projects serve 2,849 children.

A variety of intervention approaches help children with a broad range of handicaps. Some projects concentrate on a particular handicapping condition; others concentrate on other factors, such as age, cultural group, etc., regardless of the handicap. Table 1 shows a breakdown by age and handicapping condition of children served by HCEEP Demonstration Projects. Over half of the children are age 3 years or younger, and almost nine out of ten children are under age 5 years. Speech impaired and trainable mentally retarded are the most common handicaps; 26 percent of the children are multihandicapped in addition to having a primary handicapping condition (see Figure 2). Note that one third of the children are at-risk, and 96 percent of these children are age 3 years or younger.

Twenty-two projects stress services to one or more ethnic/cultural minority groups (see Table 2). In keeping with their responsibility to demonstrate their model, almost 60 percent of these projects have expertise in serving minorities that they can share with other service providers; 40 percent can share various practices; and 23 percent can share products.

TABLE I

DEMONSTRATION: Handicapping Conditions and Ages

Of Children Served

TYPE OF HANDICAP	Number of Handicapped Served by Age					
	Aged 0-36 Months	Aged 37-60 Months	Aged 61-96 Months	Aged Over 96 Months	Number of Children Served	Percent
Trainable Mentally Retarded	154	112	31	7	304	11
Educable Mentally Retarded	89	109	37	6	241	8
Specific Learning Disabilities	11	77	34	--	122	4
Deaf-Blind	17	5	--	--	22	1
Deaf/Hard of Hearing	80	68	12	--	160	6
Visually Handicapped	41	10	3	--	54	2
Seriously Emotionally Disturbed	14	102	25	--	141	5
Speech Impaired	76	218	63	1	358	12
Other Health Impaired	111	22	13	--	146	5
Orthopedically Impaired	111	107	43	10	271	9
At-Risk	882	36	2	--	920	32
Developmentally Delayed*	54	33	23	--	110	4
TOTAL	1640	899	286	24	2849	100
Multihandicapped Children	406	254	73	23	756	26
	0-36 Months	37-60 Months	61-96 Months	Over 96 Months		
Percentages by Age	57	32	10	1		

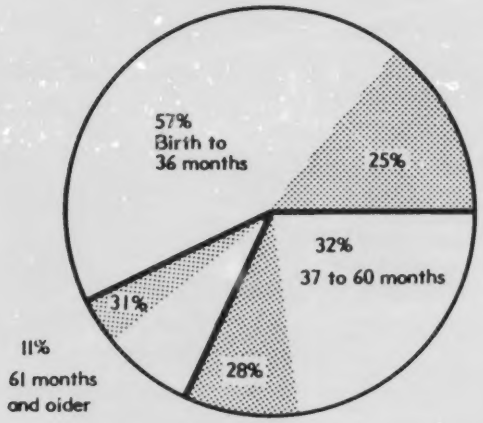
Note. n=94

* This category did not appear as a choice on the original survey. A significant number of projects, however, added this category to their forms.

The symbol "n" seen in each table represents the number of projects that responded to the particular survey question reflected in the table.

FIGURE 2

DEMONSTRATION: Ages of Children Served



Note:
Many respondents listed children under both the primary handicap and multihandicapped categories. The shaded areas represent the percentage of multihandicapped children within an age group.

TABLE 2

DEMONSTRATION: Major Focus or Stress

On Service to Ethnic/Cultural Minorities

Ethnic/Cultural Group	Number of Projects	Percent
Hispanic	16	16
Black	15	15
Asian	5	5
American Indian	3	3
Alaskan Native	1	1
Other	7	7

Note: n=97

Ultimately, HCEEP projects seek to improve opportunities for handicapped children. Part of this philosophy reflects the idea that families provide important first experiences for their infants and young children. Two thirds of the projects list both parents and the child as primary targets for direct services, while one quarter of the projects list only the child as the primary target (see Table 3). Some projects target neither the parent nor the child. One project trains pediatric residents, another serves at-risk infants of mothers who are mentally retarded, still another serves pregnant teenagers.

TABLE 3

DEMONSTRATION: Primary Targets of Direct Services

Targets	Number of Projects	Percent
Both Parents and Child	65	67
The Child	23	24
The Mother/Primary Caretaker	2	2
Both Parents	1	1
Other Professionals	1	1
Other	5	5

Note: n=97

While primary targets for services vary, virtually all the projects stress some sort of parental or familial participation. One project even requires such participation for admission. Table 4 indicates the various types of parent and family involvement activities offered by HCEEP Demonstration projects. Parent/staff conferences, parent participation on the advisory board, and identification of parental needs are activities offered by almost all of the projects. Parents also are involved in the transition of their child to their next educational placement, in classroom observation and teaching, in advocacy, in training other parents, and in fund raising. Most projects provide multiple parent/family activities.

TABLE 4

DEMONSTRATION: Parent/Family Activities

Type of Activity	Number of Projects Offering Activity	Percent of Total Project
Parent/Staff Conference	93	96
Advisory Board	91	94
Identification of Parental Needs	90	93
Transition to Next Placement	80	82
Classroom Observation/Teaching	70	72
Maintain Records	64	66
Training Workshops	63	65
Advocacy	63	65
Counseling Grops	62	64
Formal Communications	62	64
Social Groups	49	51
Develop Instructional Materials	46	47
Parents Training Other Parents	32	33
Fund Raising	28	29
Other Non-Educational or Therapeutic Services	27	28
Therapy Supervision	25	26
Formal Sibling Support Group	11	11
Respite Care	11	11
Other	16	16

Note: n=97

Demonstration projects are primarily educational in focus; however, their fiscal agencies and the environment in which they deliver services vary. Table 5 indicates the types of fiscal agencies which sponsor Demonstration projects. The three most common agencies are institutions of higher education, private, nonprofit organizations, and local education agencies (LEA). Most institutions of higher education that sponsor Demonstration projects are educational rather than medical in focus, but several projects are sponsored by other health institutions. One project is sponsored by an Indian tribe.

TABLE 5

DEMONSTRATION: Fiscal Agencies

Type of Agency	Number of Projects	Percent
Institution of Higher Education (nonmedical)	23	24
Private, Nonprofit Organization	23	24
Local Education Agency	22	23
Health Institution	9	9
Public Agency (other than educational)	5	5
Institution of Higher Education (medical)	5	5
Regional or Intermediate Education	3	3
State Education Agency	3	3
Other	3	3

Note: n=96

TABLE 6

DEMONSTRATION: Service Delivery Settings

Basic Service Setting	Number of Projects	Percent
Home and Center (not public school)	28	29
Home and Public School Classroom	16	16
Public School Classroom	14	14
Center (not public school)	13	13
Hospital or Health Center	7	7
Home and Health Center	4	4
Home	3	3
Other	12	12

Note: n=97

Table 6 lists the primary service-delivery settings of the Demonstration projects. Over half of the projects serve children in their natural environment -- the home -- although the great majority of these programs combine home intervention with outside services. Only three percent of the projects serve children exclusively in the home. The home and private school centers are the most common service environments.

Certain delivery settings make it possible for handicapped children to learn and play with nonhandicapped children. Integration experiences may involve special classes in schools primarily attended by nonhandicapped children, or, at the other end of the spectrum, they may involve handicapped and nonhandicapped children learning side by side. In Table 7, projects categorize their handicapped/nonhandicapped integration opportunities. Over half of the projects indicate that they provide some sort of integration experience, and over one third of these projects fully integrate handicapped and nonhandicapped children in either regular or special settings. One third of the projects find that the question of integration is inappropriate to their situation. Since over half of the projects provide some services in the home, some may have had difficulty describing their overall programs in terms of the integration statement choices provided in the survey. Aside from the projects listing "not appropriate" and the three percent listing "not integrated" along with other choices, only eight percent do not provide any integration opportunity.

TABLE 7

DEMONSTRATION: Integration Experiences

Types of Experiences	Number of Projects	Percent
Handicapped and nonhandicapped children are fully integrated in a regular early education setting; handicapped children receive support services within that setting.	13	14
Handicapped children are served in a special setting and integrated with nonhandicapped children for some activities.	13	14
Handicapped children are served in a special setting, with nonhandicapped children fully integrated into that special setting.	8	8
Handicapped and nonhandicapped children are not integrated.	8	8
Handicapped and nonhandicapped children are integrated in a regular early education setting; handicapped children receive support services outside that setting.	5	5
Not appropriate to the project	30	32
Multiple answers	12	13
Other	6	6

Note: n=95

TABLE 8

DEMONSTRATION: Primary Focus For Intervention

Developmental Areas	Number of Projects	Percent
Language-Communication	16	16
Sensorimotor	7	7
Social-Emotional	6	6
Cognitive-Academic	6	6
Self Help	2	2
Multiple Answers	21	22
All Areas	20	21
Other	12	12
All Areas Including Other	7	7

Note: n=97

The particular developmental focus of intervention often depends on the model being demonstrated as well as on the individual needs of the child as dictated by the child's Individualized Education Program (IEP). The Office of Special Education requires projects to develop an IEP specifying goals, teaching methods and recommended materials for each child. As the child's needs change, so does the program. In Table 8, projects list the particular developmental areas seen as the primary focus for their intervention. Language-communication is the developmental area most of the projects name for their primary focus. Sixteen percent of the projects list that area, and many more list it along with other areas. In fact, although projects were asked to choose one primary area, almost two thirds of the projects list more than one area, and more than one quarter of the projects focus on all areas of development.

The primary philosophical base of demonstration projects' model curricula spans a continuum from child-directed (experiential) to teacher-directed (behavioral) learning. Over one third of the projects align themselves with a diagnostic-prescriptive approach (Table 9). Only one percent of the projects indicate they are Montessorian in their approach. Over one third of the projects list "other" or indicate they use more than one philosophical approach in their curricula.

TABLE 9

DEMONSTRATION: Philosophical Base Of Curricula

Philosophical Approach	Number of Projects	Percent
Child Directed		
Experiential or Traditional	7	7
Montessori-Specific	1	1
Piagetian-Specific	8	8
Diagnostic-Prescriptive	36	37
Behavioral	10	10
Teacher Directed		
Multiple Answers	16	16
Other	19	19

Note: n=97

Projects indicate they use a wide variety of curricular packages of approaches. The Overview and Directory Index lists curricula by name and project user. Thirty-six curricular packages or approaches were developed by the projects themselves, and one third of these packages are available to be shared with other providers.

Projects also use a wide variety of commercial and project-developed instruments to assess child progress for the purposes of planning instruction and program evaluation. Observational checklists, psychological measures, videotape records, self-concept measures and specific medical examinations are some assessment measures named by the projects. The Overview and Directory Index and the Directory of individual project abstracts contain the names of assessment tools, project users and the administration schedules.

Projects name 90 different methods they use to assess the status of the child for the purpose of planning instruction. About one third of these methods are criterion-referenced and another third are observational. Projects also use norm-referenced tests and parent reports; 20 percent of the projects list other types of assessment methods. About 85 percent of the methods listed by projects are developed by the projects themselves; 18 of these are available to share with other providers.

Demonstration projects list about the same number of child assessment measures they use for the purpose of program evaluation. Again, about one third of the methods are criterion-referenced; one quarter of the methods are observational. Over one third are developed by the projects themselves, and almost half of these are available to share with other service providers.

Related to program evaluation, projects use a variety of designs or approaches to determine the effectiveness of child services. Experimental, quasi-experimental and objective-based designs are the most popular. Some projects use systems and naturalistic designs.

Outreach Projects

The concept of model demonstration programs is carried a step further by HCEEP Outreach projects. After their three years of HCEEP demonstration funding, selected projects have the opportunity to enter an outreach phase, no longer placing first priority on demonstrating a service model. Rather, these projects place primary effort on encouraging replication of their models. All Outreach projects that begin as demonstration projects are required by OSE to keep in operation some portion of their direct service model. This year, 48 Outreach projects are "reaching out" to communities across the nation.

Outreach activities are varied, but all are geared to replication of a model. Table 10 shows outreach activities and the amount of staff time devoted to each. All projects train personnel, and almost two thirds of the projects spend over half their staff time on this activity. Two projects spend over 75 percent of their staff time on training. At least two thirds of the projects spend some portion of staff time on each activity listed in Table 10.

TABLE 10

OUTREACH: Staff Time Spent in Outreach Activities

Activities	Proportion of Staff Time by Number of Projects				Number of Projects	Percent
	1/4	1/4-1/2	1/2-3/4	3/4		
Training	17	14	15	2	48	100
Product Development and Dissemination	33	12	1	--	46	96
Increasing Awareness	38	2	--	--	40	83
Stimulating Sites	28	6	6	--	40	83
Stimulating State Involvement	36	2	--	--	38	79
Other Consulting Activities	30	3	--	--	33	69
Other	6	1	1	--	8	17

Note: n=48

Almost all of the projects develop and disseminate products. Some products are designed for parents, others for teachers, others for administrators, health professionals and the general public. Table 11 reveals the productivity and innovation of Outreach project dissemination and the variety of material resources available within the HCEEP network. Staff-development products and general awareness materials are available from almost three quarters of the projects, while over half of the projects can share parent education materials. Products focusing on curricula for children are available from over half of the projects, and OSE's

TABLE 11

OUTREACH: Materials Developed And Available To Share

Type of Material	Number of Projects	Percent
General Awareness Materials	34	71
Parent Education Materials	27	56
Curricula for Children	26	54
Curricula for Parents	17	35
Observational Checklists	22	46
Child Screening Instruments (birth to 3 years)	7	15
Child Screening Instruments (3 to 8 years)	7	15
Child Progress Assessment Instruments (birth to 3 years)	22	46
Child Progress Assessment Instruments (3 to 8 years)	15	31
Bibliographies/Reference Materials	21	44
Program Management/Evaluation Materials	21	44
Inservice Training or Staff Development Materials	35	73
Teacher Competencies or Needs Assessments	14	29
Product Development Guides	4	8
Other	15	31

Note: n=48

The symbol "n" seen in each table represents the number of projects that responded to the particular survey question reflected in the table.

continuing focus on infants is highlighted as 11 percent more projects than last year have products available that deal with assessment instruments for children aged birth to 3 years. Refer to the Index and the Directory for specific references to products available from Outreach projects.

TABLE 12

OUTREACH: Fiscal Agencies

Type of Agency	Number of Projects	Percent
Institution of Higher Education (nonmedical)	17	35
Private, Nonprofit Organization	13	27
Local Education Agency	7	15
Regional or Intermediate Education Agency	3	6
Institution of Higher Education (medical)	2	4
Public Agency (other than educational)	1	2
Health Institution	1	2
Other	4	8

Note: n=48

Part of the changing responsibilities from demonstration to outreach services involves funding. Although the breakdowns of fiscal agencies that administer the Outreach and Demonstration projects are similar (see Tables 5 and 12), the funding strategies differ. Outreach projects receive HCEEP funds only for replication efforts. Though OSE requires these projects to maintain some portion of the direct service they provided as demonstration

models, the Outreach projects must look to other sources to fund this activity. Table 13 shows sources of continuation funding for direct services. Forty percent of the Outreach projects receive some funds from local education agencies; over a third of these projects rely on LEAs for more than 75 percent of their funds. It is interesting to note that private contributions and foundations account for less than 25 percent of funding for only nine projects and 25 to 50 percent of funding for only one project. Over half of the projects receive more than 75 percent of their funding from a single source.

Characteristics of the education models developed by the Outreach projects are similar to those of Demonstration projects. For instance, the HCEEP concern for parents and families is evident in the thrust of Outreach project direct services; Table 14 indicates that over half of the projects list the parent and the child as primary targets for direct services. The settings for service delivery by Outreach projects are listed in Table 15. Including projects that gave multiple answers, over half of the projects provide at least some service in the home.

TABLE 13

OUTREACH: Sources of Continuation Funding

For Direct Services

Type of Source	1/4	1/4-1/2	1/2-3/4	3/4	Number of Projects	Percent
Local Education Agencies	2	6	4	7	19	40
State Education Agencies	6	2	2	6	16	34
Public Agencies (other than educational)	3	--	5	8	16	34
Institutions of Higher Education	3	3	3	1	10	21
Private, Nonprofit Organizations	1	2	1	3	7	15
Private Contributions	6	1	--	--	7	15
Private Foundations	3	--	--	--	3	6
Regional or Intermediate Education Agencies	--	--	--	1	1	2
Federal Education Agencies	1	--	--	--	1	2
Other	9	1	2	1	13	28

Note: n=47

TABLE 14

OUTREACH: Primary Targets Of Direct Services

Targets	Number of Projects	Percent
The Parent and Child	25	52
The Child	12	25
Other Professionals	4	8
The Mother/Primary Caretaker	2	4
Both Parents	1	2
Multiple Answers	1	2
Other	3	6

Note: n=48

TABLE 15

OUTREACH: Service Delivery Settings

Basic Service Setting	Number of Projects	Percent
Home	9	19
Home and Center (not public school)	9	19
Center (not public school)	7	15
Public School Classroom	6	13
Home and Public School Classroom	4	8
Hospital or Health Center	2	4
Multiple Answers	7	15
Other	4	8

Note: n=48

Table 16 indicates the developmental areas projects see as a primary focus for intervention. As with Demonstration projects, the Outreach projects list language-communication as the primary developmental area they focus on for intervention. Twenty percent of the projects list that area alone, and another 48 percent list it in conjunction with other areas. Although projects were asked to choose one primary area, over half of the projects list more than one area, and over a third of the projects indicate that they focus on all areas of development.

TABLE 16

OUTREACH: Focus For Intervention

Developmental Areas	Number of Projects	Percent
Language-Communication	9	20
Sensorimotor	4	9
Cognitive-Academic	1	2
Social-Emotional	1	2
Self Help	0	0
Multiple Answers	8	17
All Areas	13	28
Other	6	13
All Areas Including Other	4	9

Note: n=46

Outreach projects base their educational curricula on a variety of philosophical approaches. Table 17 shows that the diagnostic-prescriptive approach is by far the most popular choice. However, note that even more projects list other approaches. Four projects indicate that they use a variety of philosophical approaches.

Outreach projects developed 69 curricular packages for direct services to children. And, in keeping with their responsibility to encourage replication of their models, 60 of these packages are available to share with other service providers. The Index includes names of curricula developed and/or used by the projects.

Additional information on outreach activities and products is contained in the Directory of individual abstracts beginning on page 101.

State Implementation Grants

In 1976, the federal government established the State Implementation Grant (SIG) program to help states plan and coordinate new or expanding statewide early intervention services for handicapped children. SIG grants are awarded for one- to two-year periods and may be renewed. Table 18 lists the 24 states and territories funded during 1980-81. Some are new to the SIG program; others are veteran members.

TABLE 17

OUTREACH: Philosophical Base Of Curricula

Philosophical Approach	Number of Projects	Percent
Child Directed		
Experiential or Traditional	1	2
Montessori-Specific	--	--
Piagetian-Specific	6	13
Diagnostic-Prescriptive	13	27
Behavioral	10	21
Teacher Directed		
Multiple Answers	4	8
Other	14	29

Note: n=48

Most states have passed legislation that requires local school systems to serve handicapped children. These mandates, however, vary among states, particularly in respect to the ages and handicapping conditions of children protected under the mandates. Within the SIG program, for example, Alabama mandates services for children aged 6 to 21 years regardless of handicap; Oklahoma, on the other hand, mandates services for children aged 4 to 5 years regardless of handicap and for those from birth to 3 years who are severely handicapped. Some states also have passed permissive legislation, under which local school systems may choose whether or not to serve the designated children. State legislation for each SIG is included in the SIG abstracts beginning on page 149 of the Directory.

SIG activities fall into five broad categories:

- SIG program development activities lead to new directions in services to children and families. Creating pilot sites, strengthening existing service programs, and stimulating local educational agencies to provide intervention are activities that fall under this category.
- The area of administrative/management/evaluation incorporates a variety of SIG activities, from developing approaches for better state management of the SIG

grant itself to consulting with local service providers about improving methods of evaluating child progress. Early childhood data systems, program guidelines and standards, and evaluation and monitoring strategies are developed under this area of activity.

- SIGs invest substantial resources in personnel development. Several states organize and train parents as advocates and/or service providers for their young handicapped children. Professionals receive training through workshops, institutes, seminars and graduate-level practicums.
- Communication and dissemination activities influence or inform specified audiences through a variety of print materials, audiovisual products, statewide conferences and radio/TV promotions. Products developed by and available from the SIGs are listed in the project abstracts.
- SIGs plan and implement cooperative efforts among state and local agencies that serve young handicapped children. Interagency coordination seeks to eliminate fragmented delivery at the local level and provides cost-effective services.

Table 19 shows that three quarters of the SIG projects provide inservice training in early childhood special education. Formal or informal interagency agreements were developed by 63 percent of the SIG projects. Table 20 shows that over half of the SIG states have approved early childhood rules, regulations or standards; over one third have approved guidelines.

TABLE 18

SIG: States And Year Of Funding

State	Year of Funding	State	Year of Funding
Alabama	2	Montana	1
Arizona	1	Nevada	2
California	3	New York	5
Connecticut	3	North Carolina	5
District of Columbia	1	Ohio	2
Georgia	2	Oklahoma	2
Kansas	4	South Dakota	4
Louisiana	4	U.S. Virgin Islands	2
Maine	4	Virginia	3
Maryland	1	Washington	5
Massachusetts	4	West Virginia	2
Missouri	1	Wisconsin	5

*The SIG program has been funded for five years since September 1976.

TABLE 19

SIGs Activities

Activities	Number of SIGs	Percent
Inservice Training Provided	18	75
EC/SE* Teacher Certification Standards Developed and Available	6	25
Formal or Informal Interagency Agreements Developed	15	63

Note: n=24

*Early Childhood/Special Education

TABLE 20

Features Of SIG States

Features	Number of SIG States	Percent
State-Approved EC/SE* Guidelines	9	38
State-Approved EC/SE Rules, Regulations or Standards	13	54
State-Wide Tracking System for At-Risk or Handicapped Children	7	29

Note: n=24

*Early Childhood/Special Education

For additional information about the 1980-81 SIG projects, refer to the SIG abstracts and the Index.

Early Childhood Research Institutes

Four Early Childhood Research Institutes (ECRIs) have the mission to discover and disseminate knowledge that can be used to improve services and programs for exceptional young children and their families. All four ECRIs are in the fourth year of their five-year contracts with the Office of Special Education.

Research on Early Abilities of Children with Handicaps (REACH)
University of California, Los Angeles

REACH seeks to define and explain variations in competence among handicapped and at-risk children under age 6 years. Infant studies explore sustained attention and factors that modify it. Studies with preschoolers investigate aspects of motivation, social development, temperament and cognitive ability. Other work evaluates effects of various intervention strategies on child progress.

Kansas Research Institute for the Early Education of the Handicapped
University of Kansas, Lawrence

The Kansas Research Institute focuses on developing or improving intervention methods for children at risk for handicaps. Studies identify behavioral clues and child-family interactions that affect development. Procedures are being established to assess and document child progress.

Early Childhood Research Institute for the Study of Exceptional Children
Educational Testing Service (ETS), Princeton, New Jersey
Roosevelt Hospital, New York City

Efforts at ETS and Roosevelt combine research and service strategies. Researchers develop techniques to identify infants at risk for developmental dysfunction, design sensitive assessment tools, develop and evaluate intervention techniques, and relate infant development to environmental factors. One longitudinal study screens low birth-weight infants to detect those at risk for handicaps.

Carolina Institute for Research on Early Education for the Handicapped (CIREEH)
University of North Carolina, Chapel Hill

CIREEH researchers develop curricula for severely and multiply handicapped infants, compare effectiveness of intervention programs for children at risk for environmentally caused mental retardation, develop new approaches for assessing developmental progress in moderately, severely and multiply handicapped young children, and describe familial and environmental factors thought to affect the early education of handicapped children.

Technical Assistance Centers

Helping handicapped and at-risk children and their families is a complex task. The Office of Special Education therefore provides support to Demonstration projects and State Implementation Grant (SIG) recipients through contracts with two technical assistance agencies. The term "technical assistance" in the HCEEP network refers to providing ongoing, systematic and nonevaluative helping resources.

The Technical Assistance Development System (TADS) serves 53 HCEEP Demonstration projects and 13 SIGs in states and territories east of the Mississippi River excluding Illinois, Mississippi and Wisconsin. TADS is part of the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill. TADS has been part of the HCEEP network since 1971 and originally served grantees throughout the nation.

The Western States Technical Assistance Resource (WESTAR) has been serving the HCEEP network since 1977 and provides technical assistance to 47 Demonstration projects and 11 SIGs in Illinois, Mississippi, Wisconsin, and states and territories west of the Mississippi River. WESTAR is a consortium of the University of Washington, the Teaching Research

Division of the Oregon State System of Higher Education, and the National Association of State Directors of Special Education and is based in Monmouth, Oregon.

Technical assistance centers offer a broad range of support services that assist HCEEP grantees in managing programs and accomplishing goals. Through individual on-site consultation, projects receive responsive assistance to meet the needs of their program goals and activities. At small-group workshops and larger meetings, project personnel are brought together to address common needs and to share information. Field visits between projects promote collaboration and transfer of new practices and products.

The technical assistance centers also develop materials that address HCEEP needs and concerns. TADS and WESTAR produce newsletters, bibliographies, planning guides, topical papers, monographs and this 1980-81 HCEEP Overview and Directory. Outreach projects and Early Childhood Research Institutes do not receive direct technical assistance. TADS and WESTAR, however, maintain liaison with these agencies and provide assistance through publications.

HCEEP Project Abstracts

The HCEEP project abstracts appear in this section alphabetically by state, city and project name. An index of projects and their identification numbers follows this section in the HCEEP Project Listing.

SAMOA'S COOPERATIVE EARLY EDUCATION MODEL

Address: Pago Pago
American Samoa 96799

Phone: 684/633-1323
Year of Funding: 1

Fiscal Agency: Special Education Division, Department of Education

Project Staff: Iakopo Taula'i, Director
teachers, aides, physical therapist, speech therapist

Characteristics of Target Population:
The project serves children aged birth to 8 years with any handicapping condition.

Program for Children:
The project serves children aged birth to 3 years and those older children in remote areas in a home-based program. The project serves children aged 3 to 8 years in a center-based program and provides those children presently served by Village Early Education Centers with consultation services.

Measures of Child Progress:
The project staff uses the Denver Developmental Screening Test, the Alpern-Boll Developmental Profile, the Learning Accomplishment Profile-Diagnostic and the Hawaiian Early Learning Profile to assess child progress.

Program for Parents:
Parents are actively involved in the IEP process. They receive training in intervention techniques with their children both in the home and at the center. The project offers monthly parent meetings and encourages classroom observation.

Features and Products:
The project proposes to develop a curriculum and criterion-referenced test appropriate for the young Samoan child with respect to both language and culture. The project staff will receive training in the areas of curriculum implementation, intervention techniques, data collection and parental involvement. The project will offer group sessions, videotaping and demonstration teaching to staff.

2 DEMONSTRATION

EDUCATION CENTER FOR HEARING IMPAIRED INFANTS, PRESCHOOL CHILDREN AND THEIR PARENTS

Address: P.O. Box 27708
Tempe, AZ 85282

Phone: 602/967-0636
Year of Funding: 2

Fiscal Agency: Tempe School District No. 3

Project Staff: Mildred Winemiller, Director; Maxine Turnbull, Coordinator clerk/typist, audiologist (50%)

Characteristics of Target Population:
As many as 12 children aged birth to 5 years and their families receive service through the Center. Children have hearing losses ranging from mild to profound or speech and/or language delays.

Program for Children:
The focus of intervention is on parent education and active participation in the Education Center. Services include parent guidance and counseling, audiological assessment and management, evaluation and individual therapy for the child, enrollment of 3- to 5-year-olds in a regular preschool, support for the child and the preschool staff in this mainstream setting, and consultants for psychological and occupational therapy services.

Measures of Child Progress:
The project staff uses a variety of instruments, depending on the child's age and abilities, for measuring child progress. Initial evaluation focuses on the child's current level of functioning in receptive and expressive language and overall development. The Koontz Developmental Program, Preschool Language Scale, Communicative Evaluation Chart and biannual videotapes of the child and parent contribute to the record of progress.

Program for Parents:
Parents participate in the development of an educational plan for their child and are included in the therapy sessions; parents receive guidance in working with their child. They attend individual counseling sessions, group meetings and an ongoing parent education program. In addition, parents participate as aides in the preschool and serve as members of the Advisory Council.

Features and Products
Inservice training sessions are designed to provide the personnel of the project and preschool(s) with information about hearing loss and with strategies for intervention; the goal is successful integration for the hearing impaired child. The project emphasizes the family's role in the education of the child, uses hearing children as models for language and communication at the preschool level, and uses the auditory-oral approach to communication with special attention on the development of an auditory function.

EARLY CHILDHOOD EDUCATION FOR THE SEVERELY/MULTIPLY HANDICAPPED (ECE-SMH CENTER)

Address: ECE-SMH Center, ASU
Dept. of Special Education
Tempe, AZ 85281

Phone: 602/965-3002
Year of Funding: 3

Fiscal Agency: Department of Special Education, Arizona State University

Project Staff: Thomas G. Roberts, Director
two teachers, parent program coordinator, graduate associate and assistant to PPC, physical therapist, occupational therapist, paraprofessional aide, secretary, language specialist

Characteristics of Target Population:
Twenty severely/profoundly handicapped preschool children aged birth to 6 years participate in a center-based program at ASU. Most children are multiply handicapped and functionally in the lower one-third when compared to their peers.

Program for Children:
A Basic Skills classroom environment for 3- to 6-year-old SMH children meets at the center five days a week. An Early Intervention (0-3) group meets two days a week at the center for intensive programming and parent training. In addition, clients receive periodic home visits from the project staff. Children receive individualized programming across these areas: motor (gross/fine), perceptual, language, cognitive and self-help (social). Interdisciplinary assessment involves staff at both the center and the Child Evaluation Center at Arizona Children's Hospital. The program emphasizes functional behavior analysis, direct instruction and behavior modification.

Measures of Child Progress:
The project staff uses criterion- and norm-referenced instruments to determine child progress. Comprehensive data collection and charting of skill acquisition and maintenance allow for daily and weekly monitoring of child performance. The staff summarizes weekly child progress to determine program effectiveness. The DDST, Minnesota Child Development Inventory and REEL are administered as part of routine screening and assessment to determine program eligibility, and at 12-month intervals as measures of global, developmental progress.

Program for Parents:
Individualized parent involvement includes instructional sessions at the center and in the home, small group training sessions, classroom observations and participation, conferences, progress notebooks, home visits, parent meetings, task forces and a "buddy system." Parents of children in the Early Intervention Phase are trained to implement their child's program.

Features and Products:
The project uses direct intervention techniques with severely/multiply handicapped preschool children. The project staff has developed a progress monitoring system using daily performance data. A slide-tape presentation, Parents Can Teach, depicts parents receiving training in direct instructional techniques for infants. In addition, the project has developed a slide-tape of the overall program.

CRITERION TEACHING PROGRAM

Address: 4825 Kenneth Avenue
Carmichael, CA 95608

Phone: 916/483-3264
Year of Funding: 3

Fiscal Agency: San Juan Unified School District

Project Staff: Robert Ogle, Director; Kit Marshall, Coordinator
psychologist, classroom teachers, speech and language therapist, instructional aides

Characteristics of Target Population:
The project serves 36 self-contained and partially mainstreamed learning handicapped children aged 4 to 8 (placement age 3-5.9). Determination of intensive needs and classification at "high risk" of failure upon school entry are entrance criterion.

Program for Children:
The project provides intensive instruction in skills and behaviors requisite to the regular school setting at two public school kindergarten rooms. Instruction includes pre-academics and academics, school appropriate behaviors and survival skills; project staff use intensive directly-instructed procedures. Instruction focuses on dependent skills for school subjects. Speech and language services are provided to those with identified needs.

Measures of Child Progress:
Pre and post-measures include Stanford-Binet, McCarthy Scales of Children's Abilities, Utah Test of Language Development, Assessment of Children's Language Comprehension (ACLC), Wide Range Achievement Test (WRAT), Metropolitan Achievement Test, Peabody Individual Achievement Test (PIAT), and criterion-referenced project-developed materials and IEP checkpoints used for ongoing instructional planning.

Program for Parents:
A speech and language therapist provides home program materials in conjunction with ongoing classroom therapy. A psychologist provides direct parent training as needed in home behaviors and self-help skills. Parents participate in IEP planning and review conferences and observations of the ongoing classroom program. As needed, classroom teachers implement home reinforcement plans.

Features and Products:
- Criterion Teaching Program: a handbook for replication of project components, including IEP objectives and assessment/placement information
- IEP Objectives
- Teaching Strategies
- Direct Instruction Program

ME TOO PROGRAM

Address: 655 Washington Street
Fairfield, CA 94533

Phone: 707/429-5075
Year of Funding: 3

Fiscal Agency: Solano County Superintendent of Schools

Project Staff: Bonnie A. Plummer, Director; Sharon Jobson, Coordinator
infant resource specialist, parent-infant specialist, psychologist, speech pathologist, occupational therapist

Characteristics of Target Population:
The project serves 20+ children aged birth to 3 years who are at-risk for or who are developmentally delayed, orthopedically or multihandicapped, or visually or hearing impaired.

Program for Children:
The project offers home-based infant intervention and parent training for infants under 18 months and a center-based class three mornings per week for toddlers aged 18 to 36 months. The project staff provides screening, diagnostic assessment, individual language therapy and referral for all children. The diagnostic-prescriptive intervention deals in the areas of communication, sensorimotor, cognitive, social and self-help.

Measures of Child Progress:
The Bayley Scales of Infant Development, SICD and Early Intervention Developmental Profile are the pre and posttest assessments used at 6-month intervals. The project staff rates children's attainment of yearly goals and quarterly objectives.

Program for Parents:
A parent association conducts fundraising activities and monthly potlucks. Parent education activities include classroom observation and teaching, keeping child progress data, child development workshops, parent-teacher conferences, a parent support group and advocacy. These activities enhance parent confidence, participation and competence as primary educators.

Features and Products:
The project coordinates with a medical center for referral and assessment of high risk infants and conducts a physician training program.

These products are available:

- Growing Step by Step: a child development pamphlet for parents
- A manual for developing and managing special education programs for children aged birth to 5 years
- Parent Behavior Profile: a guide to tests for infants and young children

PASADENA AREA SPECIAL INFANT TODDLER PROJECT

Address: 1741 Silverlake Boulevard
Los Angeles, CA 90026

Phone: 213/664-2937
Year of Funding: 1

Fiscal Agency: Child, Youth and Family Services

Project Staff: Bea Gold, Director; Sheila Wolfe, Coordinator
two child and family educators, evaluator

Characteristics of Target Population:
The project serves 20 children aged birth to 3 years with a variety of handicapping conditions in the Pasadena, Altadena and Sierra Madre communities whose families are eligible for Head Start.

Program for Children:
The project uses a developmental approach which focuses on individual strengths, needs and learning styles. The project uses a child-centered experiential model in the home and in the mainstream center. Children aged birth to 18 months receive home services, and children over 18 months participate in center-based mainstream groups.

Measures of Child Progress:
The staff administers the Sewall Early Education Developmental Profile (SEED) to assess child development upon entrance and at 3- to 6-month intervals. The staff monitors child goal attainments by using Individual Program Plans (IPPs) containing specific objectives. The staff gathers individual and group progress data through an Expected/Actual Date Prediction Design and multiple baseline measures.

Program for Parents:
The project considers the family the most important influence in the growth and development of the handicapped child. Basing services on this premise, the project provides families with opportunities to realize their own strengths, abilities and needs as well as those of their child. In an effort for the staff to recognize the uniqueness of each family, families participate in one-to-one staff contacts and in educational and support groups. The project staff assists and supports families in acquiring knowledge and specific skills.

Features and Products:
The project works closely with the Pasadena Head Start program and other community agencies to provide program continuity for children and families. Services include home-based services, a reverse-mainstream group and a mainstream Head Start program; these are provided according to family schedules and may occur evenings or weekends if needed. Products being developed include a revised SEED Developmental Profile, a correlated early childhood education and therapeutic curriculum, a family education notebook and a record-keeping system compatible with Head Start and other early childhood special education programs.

UCLA INTERVENTION PROGRAM

Address: Rehabilitation Center, Room 23-33
1000 Veteran Avenue
Los Angeles, CA 90024

Phone: 213/825-4821
Year of Funding: 3

Fiscal Agency: University of California at Los Angeles

Project Staff: Judy Howard, Director; Eleanor M. Baxter, Coordinator
parent-infant educators, physical and occupational therapist, language development specialist, social worker, research coordinator

Characteristics of Target Population:
The project serves 30 developmentally handicapped infants and young children aged birth to 36 months in an integrated program with nonhandicapped children. Handicapping conditions include cerebral palsy, Down's syndrome, spinal bifida, seizure disorders, emotional disturbances, chromosonal abnormalities and mental retardation.

Program for Children:
The project offers three subprograms. In the first, infants under 9 months and parents meet with an educator and/or therapist once weekly. In the second, older infants aged 9-18 months meet one to three afternoons weekly with an occupational therapist, physical therapist and educator (one nonhandicapped infant participates in the small group). In the third subprogram, toddlers aged 18-36 months meet two to five mornings weekly with an occupational therapist, physical therapist, educator and language specialist (one nonhandicapped is included with the handicapped).

Measures of Child Progress:
The project staff uses Gesell and develops IEPs every 6 months. The staff sets up a language history for and evaluates each child upon entrance. Each child is videotaped every 6 months using a select set of toys and observed for spontaneous play behavior. Daily observations focus on play, language, social, affect, sensory motor, autonomy and self-help skills.

Program for Parents:
Parents participate directly in the program with the children, as well as through guided observation from an observation room. A social worker is available for weekly group meetings and individual consultation. Parents also participate in a pool play program, newsletter, fundraising, evening meetings, fathers' group, Advisory Council and IEP development.

Features and Products:
The program focuses on optimizing parent-child interaction. Parents have organized play groups during summer break, met alternately at different homes, and planned and carried out activities for children. Research by the staff includes a pilot study on the use of non-oral communication devices by children under 3 years of age, and an evaluation of classroom interactions between handicapped and nonhandicapped toddlers. Formal and informal papers, and assessment and evaluation forms are available for dissemination.

INTENSIVE CARE NURSERY INTERACT PROJECT

Address: Child Development Center
51st & Grove Streets
Oakland, CA 94609

Phone: 415/428-3351
Year of Funding: 1

Fiscal Agency: Children's Hospital Medical Center

Project Staff: Nancy Sweet, Director
medical director, two infant educators, ICN follow-up nurse

Characteristics of Target Population:
The project serves 136 medically high-risk infants aged birth to 1 prone to developmental disabilities due to prematurity and serious neonatal illness. These infants are identified in the Intensive Care Nursery of Children's Hospital Medical Center, a tertiary treatment resource for NICUs in the northern California area.

Program for Children:
Developmental intervention, which begins in the Intensive Care Nursery at Children's Hospital, continues when recovering infants return to local secondary care ICNs and extends to the infant's home upon release. Developmental intervention is based on neonatal assessment and multidisciplinary review. Individual Developmental Intervention Plans include daily developmental therapy goals, environmental modifications and procedures for participation of parents and ICN nurses. During the first year of life, the infant receives neonatal assessment, home-based follow-up and, if needed, developmental therapy.

Measures of Child Progress:
At present, the project staff administer the Bayley Scale of Infant Development and a modified Brazelton Neonatal Assessment. As soon as it becomes available, the Assessment of Premature Infant Behavior Scale, developed by Heidi Als, will also be used.

Program for Parents:
Education and support which will facilitate attachment, care and developmentally appropriate interaction with the high-risk infant begins in the Intensive Care Nursery and continues at home.

Features and Products:
The model combines developmental intervention in the Intensive Care Nursery with comprehensive neonatal follow-up during the first year of life. The model includes training and participation of ICN nurses at Children's Hospital ICN and selected secondary care ICNs in developmental intervention with high risk infants.

PEDIATRIC INTERVENTION PROGRAM

Address: California Institute on Human Services
1801 E. Cotati Avenue
Rohnert Park, CA 94928

Phone: 707/664-2416
Year of Funding: 2

Fiscal Agency: Sonoma State University

Project Staff: Thomas P. Cooke, Director; Joan A. Ruskus, Coordinator
home based teachers, classroom teachers, physical therapist, occupational therapist, speech therapist

Characteristics of Target Population:
The project serves 30 multihandicapped children aged birth to three years.

Program for Children:
Service delivery involves implementing instructional objectives relating to the physiological, behavioral, social and emotional development of the children. It includes specialized training for staff, parent services, and coordination of activities involving other community facilities. The project uses the Hawaii Curriculum, the San Juan, Teaching Research and the PEEK Curriculum.

Measures of Child Progress:
The project staff administers the Bayley, Stanford and Receptive Expressive Emergent Language Scale (REEL) tests at 6-month intervals and the LAP biannually.

Program for Parents:
The project staff designed Parents Strength and Needs Assessment to assess parental needs and services. In addition, the staff provides support groups, parent training and individual family counseling.

Features and Products:
The project has developed a slide show, brochure, parental attitude scale and Parents Strengths and Needs Assessment. Assessment data and demographic variables are stored in a computer file.

10 DEMONSTRATION

CENTER FOR EDUCATION OF INFANT DEAF (CEID)

Address: 1428 Bush Street
San Francisco, CA 94109

Phone: 415/775-5700
Year of Funding: 1

Fiscal Agency: Hearing Society for the Bay Area, Inc.

Project Staff: Jill Boxerman and Mary Molacavage, Co-Directors

Characteristics of Target Population:
The project provides services to 17 children aged birth to 36 months and their families. Two of the children are at-risk for hearing loss, nine have bilateral sensorineural losses ranging from moderate to severe, two have conductive losses and four are deaf and blind. Of the 17 children, seven are considered multihandicapped. The program stresses serving families of various ethnic and cultural minority groups.

Program for Children:
CEID is a home- and center-based project; parents receive weekly home visits. An experiential child-centered nursery school will begin operation in January 1981, in conjunction with a Head Start program. The program uses total communication with the children and their families. Signing Exact English is the reference for the program's sign language component; Parent-Infant Communication is the language curriculum.

Measures of Child Progress:
To develop the IEP, the staff administers two criterion referenced measurements upon enrollment and at the end of the year: Koontz Child Development Program and Parent-Infant Communication. In addition, the Home Observation Scale and Teaching Scale-Nursing Child Assessment are used on a pre/posttest basis for program evaluation.

Program for Parents:
Parents and siblings are involved in home visits, nursery school, sign language classes and support groups. Parents maintain records of children's language development and participate in the advisory board. The local legal agency, Bay Area Center for Law and the Deaf, provides assistance in advocacy issues. A transitional program policy is being developed with the San Francisco Unified School District.

Features and Products:
A hearing screening program and a referral program are being developed to be used as part of routine well baby check-ups. The project stresses involvement with professional and nonprofessional members of the deaf community. The project runs an inservice training program for mental health personnel serving minority families with deaf children.

SAN FRANCISCO INFANT PROGRAM

Address: Department of Special Education
San Francisco State University
1600 Holloway Avenue
San Francisco, CA 94132

Phone: 415/469-1161
415/285-2191
Year of Funding: 2

Fiscal Agency: Frederic Burk Foundation for Education

Project Staff: Marci J. Hanson, Director
two special education teachers, physical therapist, parent coordinator, medical consultant, language consultant, psychologist consultant

Characteristics of Target Population:
The project serves 20 children aged birth to 3 whose handicapping conditions range from severely/multiply handicapped to mildly developmentally delayed. Normal toddlers are integrated into the toddler group (18-36 months).

Program for Children:
Infants aged birth to 18 months, accompanied by their parents or caregivers, attend a half-day school session weekly. Parents or caregivers, in conjunction with program staff, plan training programs for infants and receive instruction on teaching techniques. Parents or caregivers carry out daily infant educational programs in the home. Toddlers (18-36 months) attend school 3 mornings per week where they receive instruction in small groups and, when needed, individually. Parent involvement is the same as for the infant group. The project provides monthly home visits for all families. Training is provided to children across all behavioral areas of development: gross motor, fine motor, cognitive, communication, self-help and social.

Measures of Child Progress:
The project uses the Uniform Performance Assessment System (UPAS), Bayley Scales of Infant Development and a criterion-referenced checklist of curriculum objectives.

Program for Parents:
Parents receive on-site training on developing and implementing educational services for their children. A parent support group is provided bi-weekly. In addition, parent workshops in parent selected topical areas are held biweekly.

Features and Products:
The program is located in a public school.

SHINE PROJECT

Address: 3045 Santiago Street
San Francisco, CA 94116

Phone: 415/661-7274
Year of Funding: 3

Fiscal Agency: Family Service Agency of San Francisco

Project Staff: Judith Lewis, Director; Laura Goderez, Coordinator
program director, program associate, evaluation and product development assistants (all part-time)

Characteristics of Target Population:
The project can serve 10 children aged birth to 3 who are at risk and who have developmental delays or a specific diagnosis. Handicapping conditions of the current population include hearing impairment, vision impairment and Down's syndrome. The project has served those with cerebral palsy, genetic problems and mental retardation.

Program for Children:
Children are integrated with nonhandicapped children for a full day program in licensed family day care homes. Developmental programming and activities are derived from the HAWAII Guide, from the child's Infant Development Program or a therapist. Consultants are available as needed.

Measures of Child Progress:
The day care provider assesses children's progress quarterly, using the HAWAII Guide. In addition, a psychologist assesses children's progress biannually, using the Bayley Scales, and a multidisciplinary team including the parents asses the child biannually in order to develop the IEP.

Program for Parents:
The project encourages parent involvement through parent groups, through parent participation in their child's IEP development and biweekly program planning and through direct interaction with the providers and staff. Through interviews, Parent Progression Inventories and Parent Needs Assessments and reassessments, the staff assesses the initial and ongoing level of parenting skills and parental needs. This ongoing assessment provides the basis for individualizing parent program services.

Features and Products:
The program provides families with the option of family day care in homes scattered throughout the city. Day care providers go through a 13 unit training program to develop skills enabling them to understand and program for disabled infants. These units will be published by June 1981; some are available now. The staff evaluates day care environments and caregiving behaviors and provides individualized assistance and/or inservice to improve areas of need. Providers learn to reinforce therapy goals, coordinate with other professionals and often develop specialized skills, such as sign language for the deaf.

PROJECT CATCH
COMPUTERS TO AID AND TEACH CHILDREN WITH HANDICAPS

Address: 22nd and San Juan
Alamosa, CO 81101

Phone: 303/589-5851
Year of Funding: 2

Fiscal Agency: San Luis Valley Board of Cooperative Educational Services

Project Staff: Shelley Griffee, Director; Jane Clarke, Coordinator
two computer programmers

Characteristics of Target Population:
Project CATCH serves moderately to severely handicapped children of normal intelligence aged birth to 8 years or children academically below the third grade whose handicapping condition interferes with effective communication.

Program for Children:
The project is a home- and center-based language development and communication assistance program. It uses microcomputers and a developmentally-oriented infant stimulation early childhood program. A parent agency assists with auxiliary services. The project provides service referrals to other community agencies.

Measures of Child Progress:
The project staff collects data for evaluating child progress twice during the first year and three times a year thereafter. Instruments used include an adapted Environmental Language Battery.

Program for Parents:
Parents are involved in the initial informal intake, staffing, determination of individual programs and program implementation. The project is developing a product which includes an inservice packet for parents on the use and programming of microcomputers for language development.

Features and Products:
The project is developing a software language development program and a manual for its use with a computer prosthetic device.

PRIDE PROGRAM
(PARENT RESOURCES FOR INFANT DEVELOPMENT AND ENRICHMENT)

Address: 1343 Iris Avenue
Boulder, CO 80302

Phone: 303/441-3990
Year of Funding: 2

Fiscal Agency: Boulder County Board for Developmental Disabilities

Project Staff: Sharon Spritzer-Griffith, Director; Vivian Reeves, Coordinator
child development specialists, social worker, speech and language specialist, occupational therapist, psychologist, secretary, research assistant, nurse

Characteristics of Target Population:
The project serves children aged birth to 3 years who exhibit developmental delay in the major developmental areas. Children among this group are either "high risk," with problems resulting from significant deprivation or physical illness, or show the potential for delay if intervention is not initiated.

Program for Children:
Services for children include center and home visits, assessment, occupational therapy, speech and language therapy, liaison with other agencies, case reviews, reassessment and outside referrals. The approach involves a combination of education and family interaction.

Measures of Child Progress:
The Bayley, the Sequenced Inventory of Communication Development and the Milani-Comparetti Motor Development Screening Test are the pre and posttest measures given at 6-month intervals. In addition, the project uses the GUIDE as the criterion-referenced test for monthly program planning.

Program for Parents:
The project assesses family needs through a variety of observational tests including the Family Needs Assessment (WESTAR), Attachment-Separation-Individuation Scales (Foley), the Family Environment Scale (Moos), the Tennessee Self-Concept Scale and videotaping. The project offers family interaction services, as well as educational-informational meetings, social groups, parent-to-parent support meetings and agency liaison. Parents learn developmental sequences and develop skills to enhance bonding and attachment between their handicapped child and themselves. Parents are included on the Advisory Council.

Features and Products:
Weekly case reviews provide ongoing cross-training among staff members. The project provides additional training through inservice activities, staff-sponsored conferences, and local and regional workshops and conferences. Besides developing new facets of social-emotional approaches, the project compares a full interactive/educational program with a control in traditional infant stimulation programming.

MUSIC ORIENTED INTERVENTION PROGRAM

Address: 602 East 64th Avenue
Denver, CO 80229

Phone: 303/289-2208
Year of Funding: 3

Fiscal Agency: Adams County School District

Project Staff: Tom Maes, Director; Holly Graves and Eileen Attalla, Coordinators
social worker, psychologist, nurse, two aides, speech pathologist, learning disabilities teacher

Characteristics of Target Population:
The project serves 30 children aged 3 to 5 years who are mildly to moderately handicapped in the following areas: speech, language, learning disabilities, emotional/behavioral, visual impairment and hearing impairment.

Program for Children:
The project provides daily center-based intervention using A Music Curriculum. Auxiliary services include screening, assessment, parent training and counseling.

Measures of Child Progress:
Instruments administered as pre and posttests include McCarthy Scales of Children's Abilities, Stanford-Binet, California Social Competency Scale, Carrow Test for Auditory Comprehension of Language, Arizona Articulation Proficiency Scale, and Language Sample. In addition, the staff administers quarterly the Uniform Performance Assessment System.

Program for Parents:
The parent component consists of two portions: monthly meetings to provide general education concerning child development and individualized services for families whose needs go beyond the scope of group meetings.

Features and Products:
The unique feature of the program is the use of music to meet individual objectives. Its effectiveness is being evaluated by randomly assigning children to either the experimental group (music) or the control group (no music). The project has developed a music curriculum based on the objectives from the Uniform Performance Assessment System. Results presented in the second year evaluation support the use of music as an instructional tool with handicapped children. On nearly all measures, the experimental group concluded the year with higher average scores than the control group and showed greater improvement.

CLASSROOM APPROACH FOR LINGUISTICALLY IMPAIRED PRESCHOOLERS (CALIP)

Address: Department of Communication Disorders
Colorado State University
Ft. Collins, CO 80523

Phone: 303/491-6981
Year of Funding: 2

Fiscal Agency: Colorado State University

Project Staff: Marjorie R. Duffy, Director; Marcia Smith, Preschool Coordinator; Jeanne Sheriff, Training Coordinator

Characteristics of Target Population:

The project serves twelve preschool children aged 2 to 4 years. Each child has demonstrated significant disabilities (a delay of one year or more) in perceptual skills, comprehensive, retention and/or expression of language. The severely language handicapped children represent various segments of the population, such as socially disadvantaged; no particular segment is targeted.

Program for Children:

The project provides early intervention, evaluation and remediation for perceptual and language disorders in a preschool classroom setting. Services include audiological and psychological assessments, individual speech/language treatment, group occupational therapy and mainstreaming into regular preschool settings.

Measures of Child Progress:

The project selects the children based on their performance on a battery of formal and informal diagnostic procedures. These include the SICD, PPVT, Vineland, informal gross and fine motor scales, audiological evaluation, infomal assessment of functional use of verbal communication, and a linguistic analysis of spontaneous language.

Program for Parents:

The parent/family program serves a three-fold purpose: to increase understanding of each child's unique language problems, to provide basic knowledge in areas of normal speech/language, perceptual and motor development, and to teach ways to facilitate the development of linguistic competence. The project accomplishes these three facets of parental involvement through private conferences, group conferences and discussions, home visits, and classroom observation and participation.

Features and Products:

A group learning situation and individual treatment sessions concentrate intensively on the individual's unique problems. Key aspects are group occupational therapy, the integration of linguistically-handicapped children into normal preschool settings and training preschool teachers to deal with the "special child." Carefully-sequenced participation of parents and family members is built on basic knowledge and direct experience in remedial procedures.

JUNCTION EARLY EDUCATION PROGRAMS (JEEPS)

Address: 1100 Patterson Road
Grand Junction, CO 81501

Phone: 303/242-8980
Year of Funding: 3

Fiscal Agency: Hilltop House Rehabilitation Center

Project Staff: Erle H. Reid, Director; Sue Sigwart, Coordinator
two teachers, community consultants, two aides, speech pathologist, occupational therapist

Characteristics of Target Population:
The project serves 89 preschool children aged 3 to 5 years with a variety of handicapping conditions, including those who are learning disabled, seriously emotionally disturbed, speech impaired and orthopedically impaired.

Program for Children:
Services include the E. B. D. preschool operating four afternoons a week, a 5-year-old classroom operating two sessions four days a week, and support services to Head Start and day care centers during afternoons. The JEEPS curriculum offers a total communication approach, teaching many early learnig experiences such as daily language time, music, art, story time, gross motor activities, fine motor and manipulative activities, simple cooking and outside play.

Measures of Child Progress:
The project staff develops an IEP for each child using the Jefferson Early Education Profile (JEEP) which sequences a broad range of developmental tasks. Preceding this, School District 51 psychologists administer a psychological battery and other supplemental tests as needed.

Program for Parents:
The JEEPS parent education program provides effective tools for establishing optimum conditions for child development. The project allots one day per week to parent activities which include discussion groups, conferences and classroom participation. In addition, the project staff makes home visits and schedules father-child and mother-child activities and regular parent interaction groups.

Features and Products:
The program offers a unique total communication approach to early childhood education using manual sign language. The staff attends a wide range of professional community and extra-community inservice training sessions and regular School District 51 resource teacher meetings. Staff meetings are held daily. JEEPS staff regularly holds workshops for community professionals.

EARLY CHILDHOOD PSYCHO-EDUCATIONAL INTERVENTION PROGRAM

Address: 1635 Central Avenue
Bridgeport, CT 06610

Phone: 203/579-6184
Year of Funding: 3

Fiscal Agency: Greater Bridgeport Children's Services Center

Project Staff: Robert Suerken, Director; Donald F. Perras, Coordinator
nursery teachers, prekindergarten teacher, two child care workers, psychologist, psychiatric social worker, consultants

Characteristics of Target Population:
The project serves 14 emotionally disturbed/behavior disordered children aged 2 to 6 years who demonstrate moderate developmental deficits in the affective, social and behavioral domains.

Program for Children:
A nursery program accommodates seven 2- to 4-year-olds, and a prekindergarten class serves seven 4- to 6-year-olds. The curriculum uses the LAP, Developmental Therapy, PEEK, My Friends and Me Kit, GOAL Mathematics Kit and Learning Staircase Kit. The program emphasizes classroom management, affective education and readiness activities.

Measures of Child Progress:
Instruments include LAP, Developmental Therapy Objectives Rating Scale, California Preschool Social Competency Scale, Monterey Readiness Inventory, Test of Auditory Comprehension of Language, Environmental Language Inventory and Test of Language. The project staff administers all tests initially, quarterly and annually.

Program for Parents:
The philosophy of the project is family-centered. Family therapy and education facilitate the development of effective parenting skills. Parents observe their children in the project and volunteer in the classrooms.

Features and Products:
Materials on behavior management and affective education techniques are available for programs that serve similar populations.

MAINSTREAMING AND REHABILITATING CHILDREN WITH HANDICAPS (MARCH)

Address: 226 Mill Hill Avenue
Bridgeport, CT 06610

Phone: 203/366-7551
Year of Funding: 3

Fiscal Agency: Easter Seal Rehabilitation Center, Research and Demonstration

Project Staff: Diane Lombardi, Director; Amy Sebell, Coordinator
five special education teachers, physical therapist, occupational therapist, speech therapist, social worker, four paraprofessionals, secretary

Characteristics of Target Population:
Project MARCH serves moderately to severely multihandicapped children aged 3 to 6 years, with medical, physical, perceptual, social, speech and/or comprehension problems. The population is 50% black, 37% white and 13% Hispanic.

Program for Children:
MARCH implements a five-day-per-week, transdisciplinary, diagnostic, educational and therapeutic program in five early childhood classes: two developmentally delayed, one language, and two multihandicapped. Each therapist provides direct service 2½ hours per class.

Measures of Child Progress:
The project administers the Bridgeport Developmental Evaluation Procedure II prior to entry and biannually thereafter. Additional testing instruments are administered as appropriate.

Program for Parents:
Parents participate during the initial evaluation, IEP development and weekly in the program. They meet weekly with the program manager, attend monthly parent meetings and receive individual counseling when appropriate.

Features and Products:
The model is cost-effective and adaptable to different handicapped populations. Staff regularly consult with a hospital dietician, pediatric neurologist, audiologist, dental clinician and psychologist.

Products available include:
- a 20-minute video cassette (3/4") on program overview
- a 20-minute video cassette (3/4") on pre and posttest to evaluate staff development towards a transdisciplinary stance
- a slide presentation of the program with cost data
- a project manual

LEARNING ABOUT DEVELOPMENTAL DELAYS AND EARLY REMEDIATION (LADDER)

Address: 91 Northwest Drive
Plainville, CT 06062

Phone: 203/747-6801
Year of Funding: 2

Fiscal Agency: The Wheeler Clinic, Inc.

Project Staff: Jane C. Townsend, Director; Marilyn Fithian, Coordinator
speech/language pathologist, occupational therapist, two preschool educators, psychologist/program evaluator

Characteristics of Target Population:
The program serves 36 educationally at-risk children aged birth to 5 years and their parents. Eligible children exhibit a social/emotional delay, behavioral problem or relationship disturbance. Infants whose social and developmental histories indicate they are at-risk for such dysfunction are also served. Many of the children enrolled have concomitant delays in language, perceptual-motor, cognitive and/or self-help skills.

Program for Children:
The project offers a home visit program to infants aged birth to 2½ years and their parents. This home-based module recognizes the importance of the home environment and family relationships in supporting the young child's development. Individualized programming focuses on fostering optimal parent-child interactions and on enriching the home environment. A center-based classroom program serves children aged 2½ to 5 years. Small classroom groups provide socialization, therapeutic experience and learning opportunities. Individualized transdisciplinary educational plans are implemented for each child to remediate areas of disturbance/delay and to support age-appropriate learning.

Measures of Child Progress:
At the time of program enrollment, the project staff assesses each child's level of functioning using the Yale Revised Developmental Schedule, the Alpern-Boll Developmental Profile and the California Preschool Social Competency Scale (for children in the classroom module). Level of functioning is reassessed after a year of program participation or at the time the child leaves the program. The staff documents each child's ongoing progress toward a therapeutic educational objective through a quarterly review of the Individualized Developmental Plan.

Program for Parents:
Bromwich's Parent Behavior Progression forms the basis for parental involvement in home-based services. Parents participating in the home-visit module also have the opportunity to attend a monthly clinic-based Parent-Infant Workshop. Parents of children attending the classroom module observe or participate in the classroom on a weekly basis. Biweekly parent group meetings are open to all parents; these focus on improving parenting skills and enhancing the parent's contribution to their children's development.

Features and Products:
The major focus of the project is the expansion of identification and intervention services for at-risk infants and toddlers. In addition, the project seeks to refine therapeutic educational services to social/emotionally disturbed children and their families.

EARLY INTERVENTION FOR PREMATURE INFANTS AND THEIR ADOLESCENT MOTHERS

Address: 6200 Second Street, N.W.
Washington, DC 20011

Phone: 202/722-2300
Year of Funding: 2

Fiscal Agency: National Children's Center, Inc.

Project Staff: Samuel L. Ornstein, Executive Director; Judith Nealer Garrett, Assistant Director; infant project coordinator, two teachers, three teacher aides, maternal-child nurse, social worker, speech pathologist, physical therapist, occupational therapist

Characteristics of Target Population:
The project serves 15 low birth weight or handicapped infants aged birth to 3 years and their mothers who are less than 21 years of age and have not graduated from high school.

Program for Children:
The project is a home- and center-based program providing language, gross and fine motor, cognitive, social and self-help stimulation. The project staff develop individualized education plans and individualized family plans for each child and family based on assessment results. Children attend the center-based program two to five days weekly, and home visits are conducted one to two times weekly. The basic theoretical approach is developmental and prescriptive.

Measures of Child Progress:
The project staff administer the Bayley Scales of Infant Development, Milani-Comparetti and the Receptive-Expressive Emergent Language Scale as pre and post measures. The staff administer the Early LAP at the beginning of the program and at 3-month intervals thereafter. In addition, the staff record classroom data daily on the children's individualized goals.

Program for Parents:
The maternal-child nurse visits families at home one to two times weekly; the visits focus on developmental guidance and the general health of the infant. Mothers attend weekly seminars in parenting skills using the Houston Curriculum and participate in their child's clasroom two hours per month. The staff uses the HOME, the Bromwich Parent Behavior Progression and the Neonatal Perception Inventory to measure changes in parent-child interaction. In addition, the project provides crisis intervention, supportive and family counseling according to need.

Features and Products:
The project maintains an interagency referral system and ongoing relationships with major health, education and social agencies in Washington, D.C. The program also serves as a site for training programs.

INTERDISCIPLINARY MODEL FOR PARENT AND CHILD TRAINING (IMPACT)

Address: Child Development Center
College of Medicine, Box 19
Howard University
Washington, DC 20059

Phone: 202/636-6998
202/636-5636
Year of Funding: 2

Fiscal Agency: Howard University

Project Staff: Rosa Trapp-Dukes, Director; Eleanor Potter, Coordinator
social worker, teacher assistant, psychologist, secretary

Characteristics of Target Population:
IMPACT serves 11 children aged birth to 3 years who have or who are suspect for Down's syndrome.

Program for Children:
The treatment goal is to bring these children within normal developmental growth norms through early intervention. The project provides diagnostic and direct services in the areas of language, cognition, sensorimotor and psycho-social. Related services include genetic counseling, parent counseling and referrals. The curricula are developed using the IEP approach and the project's home-visit component of the Hayden Model.

Measures of Child Progress:
The project administers the Bayley and the Down's Syndrome Performance Inventory every three months and the DDST every six months.

Program for Parents:
IMPACT requires parents or caretakers to devote at least one session per week to training their child. Parents can meet together weekly or more often as needed. Monthly community forums (lectures by experts in the field) and parent workshops train parents in appropriate stimulation of their children.

Features and Products:
The project mainstreams older infants into a day care program with nonhandicapped children.

LIVING STAGE IMPROVISATIONAL THEATRE DEMONSTRATION PROJECT FOR ORTHOPEDICALLY HANDICAPPED CHILDREN AGES THREE TO EIGHT

Address: Sixth & Maine Avenue, S.W.
Washington, DC 20024

Phone: 202/554-9066
Year of Funding: 2

Fiscal Agency: Arena Stage (Washington Drama Society)

Project Staff: Robert Alexander, Director; Wendy Haynes, Coordinator
assistant director, musical director, production manager, two production assistants, five actors/educators, director of development, development assistant, assistant to the director, administrative assistant

Characteristics of Target Population:
The project serves 25 children aged 3 to 8 years with severe orthopedic handicaps.

Program for Children:
The Living Stage program asserts that the aesthetic/affective approach stimulates a positive self-concept and increases desire for communication. In turn, there is a positive change in the child's overall receptivity to learning and ability to demonstrate what he or she has learned. In a 2½-hour weekly workshop, the children explore and discover the world of imagination. Using a variety of improvisational techniques, the actors/educators involve the children in sound, movement, music and creative exercises.

Measures of Child Progress:
Living Stage uses the Panel Review Strategy, a new model, to evaluate the project's impact on the affective development of the children. The model was field implemented, and observations of panel members resulted in a written evaluation of Living Stage and a set of potential procedures to evaluate similar programs.

Program for Parents:
Parent involvement includes frequent on-site observation of workshops, ongoing consultations (including home visits) with the project coordinator regarding child progress and program goals, three formal meetings yearly to discuss objectives and techniques of the Living Stage program, and the option to participate in monthly training workshops in improvisation with the project director. The major goal of the parent component is to impact on parental attitudes toward the child's capabilities.

Features and Products:
A unique feature of the Living Stage was the implementation of the Panel Review Strategy. This model is the first of its kind to be approved by BEH (now OSE) as a feasible evaluation procedure for this kind of work. The project is presently producing a film on their activities.

THERAPEUTIC-EDUCATIONAL DAY CARE FOR INFANTS (TEDI)

Address: 1731 Bunker Hill Road, N.E.
Washington, DC 20017

Phone: 202/832-4400
Year of Funding: 3

Fiscal Agency; The Hospital for Sick Children

Project Staff: Elliot E. Lapin, Director; Etrulia Lee, Coordinator
teacher, two teacher assistants, physical therapist, occupational therapist, speech therapist

Characteristics of Target Population:
The project serves severely multihandicapped children aged birth to 5 years, their parents and their prospective public school teachers.

Program for Children:
The curriculum is therapeutically and educationally oriented. Educators, physical, occupational and speech therapists and medical personnel contribute to the assessment, program planning and implementation of an individualized educational plan for each child.

Measures of Child Progress:
The project administers the Collier-Azusa Scale, Milani-Comparetti Scale, Bzoch-League Reel Scale, Speech and Feeding Assessment and the Bayley Scale for Infant Development.

Program for Parents:
TEDI encourages parents to participate in all aspects of the program, including observation and participation in the classroom, discussions and sharing with other parents, and participation in community panels and conferences. The project offers psychological services to the parents in the form of group counseling.

Features and Products;
TEDI is an early intervention day care center. The project offers a therapeutic-educational approach to helping the severely multihandicapped child. TEDI uses a multidisciplinary team approach to the assessment, program planning and implementation of an IEP to meet each child's needs. Therapies are ongoing within the classroom.

TRAINING AND INFANT INTERVENTION PROGRAM (TIIP)

Address: Howard University Hospital
Dept. of Pediatrics and Child Health
2041 Georgia Avenue, N.W.
Washington, DC 20060

Phone: 202/745-1596
Year of Funding: 1

Fiscal Agency: Howard University College of Medicine
Department of Pediatrics and Child Health

Project Staff: Eva T. Molnar, Director; Selerya O. Moore, Coordinator
parent educator/peer trainer, administrative assistant, peer parent trainers, supplementary hospital staff, nursing staff, social worker, pediatrician, neonatologists

Characteristics of Target Population:
TIIP serves 10 to 15 inner-city infants aged birth to 3 years who have handicapping conditions or a risk factor of 10% or higher for developing moderate to severe handicapping conditions and their parents.

Program for Children:
TIIP provides early eductional/developmental intervention integrated with interdisciplinary health care. The project provides direct services through two modes: an Intensive Care Nursery (ICN) program and a Home/Clinic program. The ICN program is at Howard University Hospital and includes daily intervention activities. The Home/Clinic program is implemented in the Howard University Hospital High-Risk Clinic, the Model Office of the Pediatric Primary Care Residency Training Program, and in the infant's home. Intervention activities are selected from the Education for Multihandicapped (EMI) High-Risk Nursery Intervention Curriculum, EMI Curriculum Pool of Materials, Portage Project materials and other developmental curricula.

Measures of Child Progress:
TIIP uses anecdotal records, daily observations, recorded daily prescribed activities and parent and staff notations in diary booklets to assess child progress. The project staff administers the EMI Assessment Scale every three months and the Bayley Scales every 6, 12 and 18 months adjusted age and every 24 and 36 months chronological age.

Program for Parents:
TIIP works with parents within 24 hours after the birth of their child. The project provides parent education and infant intervention through general group meetings, neighborhood cluster meetings and individual home visits.

Features and Products:
The project trains allied personnel and project staff on the critical care aspects of an ICN. TIIP conducts early assessment of minority parents' and families' child-rearing and psychosocial needs while in the hospital after the birth of their infants. The project staff works directly with minority pediatric residents through the Model Office, a simulated private pediatric setting. Project staff will develop a protocol for the child development specialist or early childhood educator working within a primary care pediatric training setting and/or private physician's office.

26 DEMONSTRATION

COMPREHENSIVE CARE TO HIGH-RISK HANDICAPPED NEWBORN AND FAMILY

Address: P. O. Box 016820
Mailman Center
Miami, FL 33101

Phone: 305/547-6961
Year of Funding: 2

Fiscal Agency: University of Miami

Project Staff: Richard Iacino, Director
neonatal family counselor, clinical social worker, nursing coordinator, infant stimulation specialists, evaluator, home visitor

Characteristics of Target Population:
The project serves infants admitted to the regional special care perinatal nurseries, their primary caregivers and the developing statewide network of regionalized perinatal care centers and infant intervention projects. The project screens over 500 newborns and mothers annually and provides hospital-based intervention for 55 infants, with home-based follow-up for the 20 highest risk infants.

Program for Children:
All newborns with a prognosis of extended hospitalization (beyond 3 weeks) are screened into three risk groupings: handicapped, high-risk for developmental delay and low-risk for developmental problems. The project provides supplemental stimulation for infants in the high-risk group and rehabilitative developmental intervention programming for infants in the handicapped group. The low-risk group remains in a nonintervention and monitored status. The program focuses primarily on appropriate sensorimotor development and early social interaction. The project derives stimulation activities from existing hospital nursery program curricula and some project-developed material.

Measures of Child Progress:
Project staff monitor the developmental progress of infants in the nursery intervention program using a project-developed instrument; they also monitor infants in the home-based follow-up intervention program using the Early LAP. The staff monitor project efficacy by year-long follow-up evaluations using a multidisciplinary team evaluation approach for a subsample of project clients.

Program for Parents:
Project staff visit all mothers of infants admitted to the newborn special care nurseries for reasons other than observation to provide earliest possible crisis counseling. During this time, the staff assess the need for continuing social services and/or counseling and coordinate the initial visit of the mother to the nursery. The project provides weekly evening information and counseling groups and predischarge teaching.

Features and Products:
The project is developing protocols for appropriate consulting techniques with a multi-ethnic population (Black, Haitian Black and Hispanic). The project focuses research efforts in behavioral/physiological responses of the premature newborn to supplemental stimulation.

ECHO-PARENT/INFANT EDUCATION PROJECT (ECHO-PIE)

Address: Department of Neonatology
Orlando Regional Medical Center
1414 South Kuhl Avenue
Orlando, FL 32806

Phone: 305/422-3200
Year of Funding: 2

Fiscal Agency: Orange County Public Schools

Project Staff: Shelby Morrison, Director; Linda Stone, Coordinator
parent counselor, two infant educators, teacher's aide

Characteristics of Target Population:
The project serves 30 infants selected from the Orlando Regional Medical Center Neonatal Intensive Care Unit and their parents. The infants are considered at risk for handicapping conditions.

Program for Children:
ECHO-PIE provides in-hospital infant intervention. Upon discharge, infants are enrolled in a weekly home-based intervention program. Project staff write IEPs and develop individual profiles for each infant in the areas of sensory, language and personal-social development.

Measures of Child Progress:
The project administers the Bayley Scales, REEL, James Nurturing Scale and audiological, physical and neurological examinations biannually. Project staff share results with parents.

Program for Parents:
Support services to parents are in the form of peer-counseling and/or discussion groups. Parents in the home-based program receive training in intervention techniques. In addition, the project is developing parent counseling and education programs and a model in-hospital parent education program for parents and medical staff working with high-risk neonates.

Features and Products:
The project has developed a handbook for parents with infants in the NICU, a discharge planning tool and discharge booklet for home care, and a resource guide to services for preschool handicapped children in central Florida. The project will develop two sound-slide presentations on the ECHO-PIE project model and the etiology of high-risk factors in the neonatal population.

UNISENSORY PROJECT

Address: P. O. Box 95025
Atlanta, GA 30347

Phone: 404/237-6141
Year of Funding: I

Fiscal Agency: Auditory Educational Clinic, Inc.

Project Staff: Ellen A. Rhoades, Director; Sally Tannenbaum, Coordinator
two parent adviser/therapists, secretary

Characteristics of Target Population:
The project serves 20 hearing-impaired children aged birth to 6 years and 10 aged birth to 3 years.

Program for Children:
The full-year program provides weekly home- or center-based demonstration-therapy sessions using the auditory-verbal or unisensory approach. Parents act as co-therapists daily. The project mainstreams all children aged 2 to 6 years in community preschools; staff visit the children monthly. In addition, the project offers comprehensive and community-based audiological management.

Measures of Child Progress:
UNIsensory administers general pre and post measures using the Minnesota Preschool Scale and tests general communication development quarterly using the Bzoch-League Receptive-Expressive Emergent Language Scale and the Preschool Language Scale. The project uses other instruments for formative/summative measures in the areas of receptive language, expressive language, speech, listening, auditory memory and home/parent-child interaction.

Program for Parents:
Parents act as co-therapists in the UNIsensory approach and carry out activities demonstrated in the weekly therapy sessions. They collaborate with the staff in audiological management and mainstreaming, participate in dissemination activities and serve on the advisory council. During an intensive orientation period, the project provides information on sound audiological management and on understanding hearing loss. Parents meet with therapists monthly to discuss individual child progress and in-group meetings with staff to discuss interests of the parents.

Features and Products:
Staff and parents participate in preservice orientation to become organized and well-informed of project goals and program planning, implementation and evaluation. Follow-up meetings foster interagency cooperation, and bimonthly staff meetings include analysis of videotapes and written reports. Evening or weekend instruction is available.

CHILD-FAMILY-COMMUNITY (C-F-C)

Address: P. O. Box 1999
Thomasville, GA 31792

Phone: 912/226-9452
Year of Funding: 2

Fiscal Agency: Thomasville City School System

Project Staff: Jerri Patterson, Director
family service worker, child-find paraprofessional, family service paraprofessional, secretary

Characteristics of Target Population:
The project serves 50 to 100 high risk, abused, at-risk or moderately to severely handicapped children aged birth to 5 years, families of handicapped and community service agencies. The project maintains a zero-reject policy.

Program for Children:
Levels of disposition available: Level 0 - no services are necessary; Level I - tracking by the project; Level II - periodic contact by project staff, IEP; Level III - ongoing, frequent contact by project staff, IEP.

Measures of Child Progress:
The project measures developmental gains pre and post using the Alpern-Boll Developmental Profile, Denver Developmental Screening Test and Portage Project Checklist.

Program for Parents:
From a family-needs inventory and parent questionnaire, the project develops an individual family plan (IFP) which reflects the level of project involvement with the family. The methods used to meet these needs may range from group work to individual work with families.

Features and Products:
The C-F-C Project provides training in stimulation and parenting skills to increase the families' knowledge and use of community resources. The ultimate goal of C-F-C is to help families develop into successful and knowledgeable caregivers for their preschoolers with special needs.

FAMILY CENTERED CARE FOR INFANTS AT HIGH RISK OF DEVELOPMENTAL DISABILITIES

Address: Department of Pediatrics
1319 Punahou Street
Honolulu, HI 96826

Phone: 808/947-8511 x731
Year of Funding: 1

Fiscal Agency: Kapiolani Children's Medical Center

Project Staff: Setsu Furuno, Director; Katherine O'Reilly, Coordinator
physical therapist, occupational therapist, speech pathologist, early education specialist infant enrichment nurse, social worker, clerk

Characteristics of Target Population:
The project serves infants aged birth to 18 months and their families. Criteria include infant residence in the Neonatal Intensive Care Unit and birth weight under 1500 grams; criteria exclude obvious birth defects as these infants are already receiving service. The project monitors infants for 9 months after their discharge from the hospital.

Program for Children:
Intervention occurs in three phases. A transdisciplinary team works with the infant and parent daily during the subacute and recovery phases; weekly during the outpatient phase. The project staff uses the EMI-ART curriculum during the subacute phase and the Hawaii Early Learning Profile and Activity Guide (HELP) during the later two phases.

Measures of Child Progress:
Assessments include the Brazelton Neonatal Assessment Scale, Amiel-Tisson, Uzgiris-Hunt, REEL, Bayley and standard assessments by the occupational therapist, physical therapist, speech pathologist and audiologist.

Program for Parents:
Parents receive direct intervention along with the infant. Major goals include the promotion of parent-infant bonding, increased knowledge of child development and basic parenting skills. Parent group meetings are also a regular part of the program.

Features and Products:
The project is preparing a staff development program for working in an NICU.

EDUCATIONAL SERVICES FOR RURAL INFANTS AND CHILDREN

Address: College of Education
University of Idaho
Moscow, ID 83843

Phone: 208/885-6150
Year of Funding: 3

Fiscal Agency: University of Idaho

Project Staff: Jennifer Olson, Project Manager; N. Dale Gentry, Project Director educational coordinator, parent coordinator, educational assistant

Characteristics of Target Population:
The project offers a home-based program for infants aged birth to 18 months and a classroom-based program for children aged 18 months to 5 years. Handicapping conditions include physical (gross and/or fine motor skills), language and mental delays.

Program for Children:
Children and their families participate in a systematic instructional model of direct intervention. The interdisciplinary team assesses the children and establishes specified objectivies with rate and date criterion. The team monitors the children's performance daily and uses the data as a basis for intervention.

Measures of Child Progress:
The project staff administers ongoing informal skill assessments, the Adaptive Performance Inventory, UPAS and SICD. A communication disorders specialist and physical therapist perform additional assessments as necessary.

Program for Parents:
Parents receive direct training in parent-teacher communication systems and program skills as related to their child's program. The project models programs for the parents and provides interns to support the home programs as needed.

Features and Products:
The program has been modified to serve parents who cannot bring their child to the center on a daily basis. The program includes a phasing strategy whereby parents learn appropriate skills and gradually become independent of the project staff for ongoing service.

EARLY INTERVENTION PROJECT (EIP)

Address: 2300 Children's Plaza
Chicago, IL 60614

Phone: 312/649-4571
Year of Funding: 1

Fiscal Agency: Children's Memorial Hospital

Project Staff: James John Reisinger, Director; Victoria V. Lavigne, Coordinator teacher, speech and language specialist (50%), secretary

Characteristics of Target Population:
In the first 6 months, EIP is projected to serve 27 children aged birth to 5 years. Those accepted display problematic, acting-out behavior such as noncompliance, tantrums, or aggression, or developmental delays or deviations. Developmental problems include overall delay, language problems, visual impairment and hyperactivity. Close to 50% of the population displays multiple problems.

Program for Children:
The program is a modular system with entrance into each module based on need. In the Toddler Management module, problematic behavior is changed by instructing the parent in using behavioral strategies. In the Individual Tutoring module, the parent learns how to facilitate systematically the child's development, particularly in speech and language. The preschool module promotes social behavior and facilitates academic readiness skills. Other modules include a Theory Training Group for mothers and a liaison module to coordinate communication with agencies receiving EIP children.

Measures of Child Progress:
The Toddler Management, Individual Tutoring and Preschool modules incorporate a systematic data collection procedure to assess the child's initial functioning as well as day-to-day progress during intervention. The staff uses the Brigance Diagnostic Inventories to assess children upon entrance and during intervention.

Program for Parents:
Parents receive one-on-one instruction in behavioral change strategies, including behavioral observation, principles of behavior change and planning programs for their child. This instruction is augmented by group theory training. When parents have successfully met goals set for their child, they train new parents or assist in the preschool module.

Features and Products:
EIP emphasizes training of parents as primary change agents. These parents become a work source for the project, thus allowing EIP to provide cost-effective service for young handicapped children. The data collection procedure incorporated into the daily program enhances EIP's accountability to the consumer and allows parents to monitor continuously their child's progress. In addition, this procedure ensures updated program planning for each child.

HI-MAPS PROJECT
(A MODEL FOR HEARING-HANDICAPPED INFANTS PROVIDING MEDICAL, ACADEMIC AND PSYCHOLOGICAL SERVICES)

Address: David T. Siegel Institute
for Communicative Disorders
3033 South Cottage Grove Avenue
Chicago, IL 60616

Phone: 312/791-2900
Year of Funding: 2

Fiscal Agency: Michael Reese Hospital and Medical Center

Project Staff: Valerie Feldman, Director
parent coordinator/counselor, child development specialist, teacher of the deaf, teaching assistant, registered interpreter for the deaf (communication/sign language teacher), speech and language resource specialist, assessment/evaluation specialist, clinical audiologist, otologist, pediatric neurologist, ophthalmologist, physical/occupational therapist

Characteristics of Target Population:
The project serves hearing-handicapped infants and toddlers aged birth to 3 years, including those with neurological, orthopedic and emotional/behavioral disorders.

Program for Children:
Services include comprehensive medical and developmental evaluations, parent/child educational sessions (individual and group), otological (audiological) services, medical follow-up (ophthalmological, pediatric, neurological, etc.), and occupational and physical therapy.

Measures of Child Progress:
The project staff administer the Bayley and Gesell Scales to gather baseline information on all children. In addition, the staff collect otological/audiological and medical (neurological, ophthalmological) information. The project has begun development (HI-MAPS Communication Codes) of assessment instruments and techniques to measure growth in language/communication and social skills.

Program for Parents:
Parents participate in individual and group sessions with children and teachers. In addition, they are involved in parent counseling groups and a communication/sign language class.

Features and Products:
- HI-MAPS Data Base Format: an information-gathering tool for hearing-handicapped children and their families
- HI-MAPS Communication Codes: formal measurement scales to assess language/communication growth
- HI-MAPS Child Development Bibliography: an annotated bibliography on developmental issues of hearing-handicapped infants and toddlers

PRE-START - A FAMILY FOCUSED MODEL OF SERVICES FOR HIGH-RISK INFANTS

Address: 2160 S. First Avenue
Maywood, IL 60153

Phone: 312/531-3499
Year of Funding: 3

Fiscal Agency: Department of Pediatrics
Loyola University
Stritch School of Medicine

Project Staff: Jennie E. Swanson, Director
parent coordinator, family counselor, external evaluator, medical consultants

Characteristics of Target Population:
The project serves the families of 60 high-risk infants from a neonatal intensive care unit who were born at Loyola University McGaw Hospital or transferred to the hospital from 12 community hospitals. Services are available to children until age 3.

Program for Children:
The Pre-Start project approach is neuro-developmental and interdisciplinary and is based on a family-child competency model. Each child's competencies provide a basis for more successful parent-infant transactions.

Measures of Child Progress:
Measures include the Apgar (at birth); Assessment of Term Characteristics (at birth and within 10 days); DDST and the Swanson Infant Follow-up (at 1, 3, 7, 12, 18, 24 and 30 months); Parent Questionnaire (7 and 30 months); Schmerber Parent Attitude Survey (at term, 1 and 3 months, and 1 year); and a pediatric neurology exam (annually, if indicated). The Revised Gesell is administered at 12 and 24 months. All of the data (prenatal through 3 years) is recorded on custom-designed op-Scan computer forms.

Program for Parents:
A team from medicine, education, theology and nursing serves as a resource to parents, the primary facilitators for infants. Program options include parent-to-parent support and contact, individual and family counseling, information seminars, charting by parents using Parents in Child Development, and crisis intervention. A special focus is on the sensitivity and responsivity of team members to parents' feelings, needs and concerns.

Features and Products:
The program focuses on the parent as the primary caregiver and educator of the child and begins facilitation at birth for pre-term, high-risk infants. The project staff develop support systems for the family which include parent-to-parent calling groups, parent organizations, community referral service and pastoral counseling. Assessment is used as a basis for parent-child interaction and experience. In addition, the project is housed in a major medical center and uses a transdisciplinary team. The project has established a child development component in the neonatal fellowship program for pediatricians.

Products developed include: Partners in Child Development, a videotape on parents documenting their child's developmental progress; In the First Days, a pamphlet for and written by parents of high-risk infants; the Pre-Start model description; and the Swanson Infant Follow-up, a neuro-developmental assessment system for high-risk infants from birth to 3 years.

PROJECT TRACE
TRANSITIONAL RESOURCE ADDRESSING CHILDREN'S EDUCATION

Address: 321 East Forest Avenue
West Chicago, IL 60185

Phone: 312/231-1670
Year of Funding: 3

Fiscal Agency: West Chicago Elementary School District #33

Project Staff: Barbara D. Waller, Director; Susan Fay-Wilcox, Coordinator project facilitator

Characteristics of Target Population:

Project TRACE serves 55 handicapped children aged 3 to 8 years in four placement alternatives. The children must exhibit a 12-month delay, as determined by standardized instruments, in one or more of the following areas: gross and fine motor, self-help skills, receptive and expressive language, visual and auditory processing skills, social behavior, and prereadiness, readiness and academic skills.

Program for Children:

The TRACE structure consists of four placement alternatives: a preschool handicapped program, supportive service to private nursery schools, a transitional kindergarten and a transitional primary program. The curriculum is developmental and focuses on the areas described above. The project staff designs each child's individualized educational program using a process of referral, case study evaluation and multidisciplinary staffing.

Measures of Child Progress:

Each student receives a case study evaluation prior to placement in a program. The evaluation includes a standardized measurement of the child's intellectual potential, achievement, processing skills, motor development, speech and language skills and social behavior. The staff reevaluate deficit areas in the spring to measure progress. In addition, the staff employ pre and posttest measures to assess child progress and systematically collect data on all IEP goals and objectives. Use of the Brigance provides consistency and continuity of measurable objectives.

Program for Parents:

Parent-family participation includes monthly home visits at the preschool level and quarterly conferences at the other placement levels. The project offers weekly newsletters and monthly parent meetings for parents of handicapped and nonhandicapped children; the newsletters and meetings address needs identified through a parent questionnaire. Workshops in behavior management are scheduled as needed. The district's pupil personnel services staff provide additional support services.

Features and Products:

The project provides an initial staff training session and continuing inservice training based on a staff development agreement between each staff member and the director. Staff development needs are identified through a project-developed checklist and met through staff participation in workshops, conferences, classes, research and other projects.

MONROE COUNTY MULTICATEGORICAL MODEL PRESCHOOL

Address: 2853 East 10th Street
Bloomington, IN 47405

Phone: 812/337-6805
Year of Funding: 3

Fiscal Agency: Indiana University Developmental Training Center

Project Staff: Susan K. Shuster, Director; Gen Shelton, Coordinator
two demonstration teachers, two instructional associates, curriculum developer/evaluator, secretary

Characteristics of Target Population:
The project serves 16 severely to moderately handicapped children aged 3 to 6 years. Four nonhandicapped children participate as peer models.

Program for Children:
The project provides a model for serving young children in the public school system. Comprehensive services to children include integration opportunities, parent education, speech/language, physical and occupational therapy, adapted physical education, health and social services, transportation, and interdisciplinary staffing.

Measures of Child Progress:
The project administers the Indiana Home Teaching System and the Portage Behavior Checklist biannually, the Thesaurus of Behavioral Objectives annually.

Program for Parents:
The project views parents as planners and advocates for their children. The parent education component is individualized and determined by the Parent Needs Assessment. Parents participate in large and small group meetings, in home visits by the demonstration teachers and in the development of IEPs.

Features and Products:
The project's integration/mainstreaming component is a unique feature. There are several levels of integration within the preschool: four normal peer models are integrated into the project classroom; three students are mainstreamed into regular preschool programs; and others are mainstreamed into the least restrictive environment of an elementary school. The project recently produced a paper on the project's in-house data-based instruction; the Goal Attainment Scaling System and anecdotal record keeping are highlighted.

PROJECT FINIS
(FAMILIES WITH INFANTS IN NETWORK OF INTERACTIONAL SUPPORT)

Address: 210 South 12th Avenue
Marshalltown, IA 50158

Phone: 515/752-1578
Year of Funding: 1

Fiscal Agency: Area Education Agency #6

Project Staff: Damon L. Lamb, Director
teacher, occupational therapist, physical therapist, pediatric nurse, language clinician, social worker, teacher associate, psychologist

Characteristics of Target Population:
Project FINIS serves 35-45 children aged birth to 36 months. Handicapping conditions include mental disabilities (mild to moderate), orthopedic impairments and multiple handicaps.

Program for Children:
The project provides center-based services to handicapped infants and their families. Emphasis is on infant-caregiver and family interactions. Children receive instructional services ranging in frequency from one session per week to daily sessions. Short term (no more than ½ day per week) respite service is available for project families. The project uses the Hawaii Early Learning Curriculum for the mild and moderate population.

Measures of Child Progress:
Summative (pre/post) measures of infant progress include SICD, Bayley Scales of Infant Development, Environmental Prelanguage Battery, Environmental Language Inventory, Peabody Motor Scales, HOME and the Marshalltown Behavioral Developmental Profile. Formative measures include Hunt-Uzgiris Scales, curriculum-linked assessments and IEP progress data.

Program for Parents:
Services for families include a Pilot Parents Program, Family Life Education Classes, Saturday Morning and Evening Father-Infant Sessions and Family Systems Counseling. A family development plan, which follows assessment of the Family System, is established with all families. Assessment focuses on system parameters and communication/problem-solving skills.

Features and Products:
Project FINIS uses structured interview procedures to assess interactional characteristics of families. Both triadic (family) and dyadic (infant-caregiver) interactions are assessed. Through the Family Life Education Classes, effective interactional skills are taught. Pre and post measures use videotape coding procedures to demonstrate change. Additional materials developed include a Management System for Early Childhood Curriculums and a Cognitive Language Observational Screening Guide.

A TRANSDISCIPLINARY APPROACH TO THE EDUCATION OF SEVERELY/MULTIPLY HANDICAPPED PRESCHOOL CHILDREN

Address: Department of Special Education
Multiply Handicapped Preschool
University of Kansas Medical Center
Kansas City, KS 66103

Phone: 913/588-5946
Year of Funding: 3

Fiscal Agency: University of Kansas

Project Staff: Doug Guess, Director; Cindy Jones, Coordinator
two head teachers, four teaching assistants, parent consultant, physical therapist, typist

Characteristic of Target Population:
The project serves 12 preschool children aged birth to 5 with severe and profound multiple impairments.

Program for Children:
The project staff provides educational programming four days per week from 9:30 a.m. until 3:00 p.m. Individual and small group program sequences emphasize the development of functional skills applicable to the home and classroom.

Meaures of Child Progress:
The project staff coordinate a comprehensive transdisciplinary evaluation before writing the IEP. A follow-up assessment occurs in May. Assessment instruments used are Callier-Azusa, TARC Assessment Inventory and Bayley Scales of Infant Development. The staff also conduct audiological, visual, oral-motor (feeding) and reflex evaluations. Progress toward IEP goals is monitored through daily data collection and review.

Program for Parents:
Parents are involved in screening, assessment, IEP development, program implementation and review. In addition, the project offer regular information groups and assistance in locating and transferring to other programs. Parent-child teaching in both the classroom and at home are available upon request.

Features and Products:
A manual describing all procedures developed and implemented by the project will be available in 1981.

THE S-E-KAN PROJECT
AN INTERACTIVE CURRICULUM MODEL FOR PROVIDING COMPREHENSIVE EDUCATIONAL SERVICES TO HANDICAPPED INFANTS, PRESCHOOL CHILDREN AND THEIR FAMILIES IN A RURAL AREA

Address: Parsons Research Center
Parsons, KS 67357

Phone: 316/421-6550
Year of Funding: I

Fiscal Agency: University of Kansas, Bureau of Child Research

Project Staff: Lee Snyder-McLean, Director and Coordinator
handicapped infant development specialist, language/communication curriculum specialist

Characteristics of Target Population:
The project supports early intervention services for handicapped, gifted and at-risk children aged birth to 6 residing in a rural area in southeastern Kansas. Currently, 38 children aged 3 to 6 are enrolled in a center-based program, with infant/toddler services scheduled for implementation in the second year of project funding.

Program for Children:
The project delivers services through various programs ranging from primarily center-based to primarily home-based programming and provides additional support services to individual parents and parent groups on the basis of identified needs. The curriculum reflects an interactive model of learning in both generic and specific skill areas.

Measures of Child Progress:
The project staff administer the Brigance Inventory, Alpern-Boll and SICD annually; additional language/communication assessment (e.g., Carrow and "Oliver") are administered as needed. Specific criterion-referenced probe tests are used weekly to assess progress toward IEP objectives.

Program for Parents:
All parents participate in the assessment and IEP process and are responsible for some degree of program carryover and monitoring in the home. Parents and project staff individually negotiate further involvement and provision of support services.

Features and Products:
The focus of this project is to develop a program model with an interactive, comprehensive curriculum that allows targeting of essential generic and specific skills for the children. Moreover, the program model is designed to accommodate the differing needs of these children and their families, while maintaining maximal efficiency in terms of teacher/staff time required for administrative activities versus direct services to the children.

EASTERN KENTUCKY COALITION FOR THE HANDICAPPED

Address: P. O. Box 8003
465 Springhill Drive
Lexington, KY 40503

Phone: 606/278-0549
Year of Funding: 3

Fiscal Agency: United Cerebral Palsy of the Bluegrass

Project Staff: Flonnia Taylor, Director; Jo Allard, Coordinator
pediatric neurologist, physical therapist, speech/language pathologist, home service worker

Characteristics of Target Population:
The project serves over 35 multiply and severely handicapped children aged birth to 12 years.

Program for Children:
The project assists public school systems in eastern Kentucky develop classrooms for multihandicapped children. Staff provide screening and assessment prior to placement and regular consultation to assist development and implementation of the education plan. The project operates two home- and center-based preschool programs for children aged birth to 5 years. Staff provide screening, assessment, programming and ongoing consultation. The home service worker implements programming suggestions during home visits using the Carolina Curriculum for Handicapped Infants.

Measures of Child Progress:
The project measures progress of public school children annually on a pre/post basis using the Sequenced Inventory of Communication Development (SICD), Motor-Free Visual Perception Test, Zimmerman Preschool Language Scale, Brigance, Peabody Picture Vocabulary Test and others as appropriate. The project measures progress of children in the preschool programs annually on a pre/post basis using the Lexington Developmental Scale, Carolina Curriculum Assessment and Infant Learning Accomplishment Profile.

Program for Parents:
Parents complete a needs assessment inventory. In addition, parents participate in small group meetings (supportive/educational in focus), the Advisory Council, a parent-operated advocacy organization, training of other parents, training workshops, fundraising and public education activities.

Features and Products:
A parents' resource manual is available. The project is now completing a replication manual.

EARLY EDUCATION PROGRAM FOR DOWN'S SYNDROME INFANTS AND CHILDREN

Address: Hikes Annex
3819 Bardstown Road
Louisville, KY 40218

Phone: 502/456-3264
Year of Funding: I

Fiscal Agency: Jefferson County Public Schools

Project Staff: Joyce Paul, Director; Juanita Landers, Coordinator
three classroom teachers, four classroom aides

Characteristics of Target Population:
The project serves 32 Down's syndrome children aged birth to 5 years.

Program for Children:
The project conducts an Infant Preschool class for children aged birth to 18 months two hours per day in a school setting. Parents bring their child one hour per week for ongoing assessment and training in techniques to enhance the child's skill development. Early Preschool class serves children aged 19 to 36 months in a half-day, school-based group program. Two Intermediate Preschool classes for children aged 3 to 5 years operate for a full school day, five days per week. Project staff determine assignment to this program by chronological and developmental age. The project employs individualized programs following normal developmental sequences in motor, communication, social, cognitive and self-help skills. The Infant and Early Preschool curriculum is based on the Seattle model. The Intermediate Preschool curriculum continues the Seattle model but also provides specific preparation for the skills identified in the school district's regular kindergarten curriculum.

Measures of Child Progress:
Project staff administer the Vineland Social Maturity Scale upon entry to the program, the Brigance Inventory of Early Development, the Learning Accomplishment Profile and Infant LAP weekly, and the Denver Developmental Screening Test and the Developmental Sequence Performance quarterly. The Cattell or Bayley is administered to children at aged 3 years.

Program for Parents:
The Parent-to-Parent Program offers peer support and encourages sharing and participation in the model demonstration program. The Parent Education Program members schedule meetings for general information concerning Down's syndrome and community resources. Parents receive assistance regarding the assessment and teaching of their children in the Parent Training Program. Parents may serve on the Advisory Committee, thus providing input regarding the model and advocating actively for early education for the handicapped. The project requires parent participation in assessment, IEP development, attendance, carrying out the instructional program and data collection.

Features and Products:
The project operates in three public elementary schools. Pupils in the Intermediate Preschool classes engage in selective mainstreaming with kindergarten pupils. Fifth grade students provide weekly peer tutoring; university students provide additional individualized instruction.

CHILDREN'S CENTER INFANT DEVELOPMENT PROGRAM

Address: 1100 Florida Avenue, Bldg. 119
New Orleans, LA 70119

Phone: 504/948-6881
Year of Funding: 2

Fiscal Agency: Louisiana State University Medical Center

Project Staff: Stanley H. Abadie, Director; Patsy Poche, Coordinator
curriculum specialists, special educator, teacher assistant, physical therapist, occupational therapist, speech therapist, social worker, pediatric neurologist, audiologist

Characteristics of Target Population:
The project serves multihandicapped, orthopedically impaired, speech impaired or retarded children aged birth to 3 and their parents.

Program for Children:
The project uses a transdisciplinary approach to deliver service delivery to home-program and classroom children. The intervention is based on six target areas of gross motor, fine motor, communication, self-care, social/emotional and cognitive development.

Measures of Child Progress:
The project uses the Bayley Scales of Infant Development, Early Intervention Developmental Profile, Sequenced Inventory of Communicative Intent and Slobin in the initial evaluation and at 6 month intervals to monitor child progress.

Program for Parents:
Parents are involved in a variety of experiences individualized to the needs of the child and family. The project offers to all parents group educational sessions, individual parent training sessions, guided classroom observations, classroom participation and participation in IEP development and supportive services.

Features and Products:
The program staff is currently developing an infant curriculum for classroom teachers and parents of young handicapped children aged birth to 3 years.

ORLEANS MODEL FOR PRESCHOOL HANDICAPPED

Address: 703 Carondelet Street
New Orleans, LA 70130

Phone: 504/527-0363
Year of Funding: 3

Fiscal Agency: Special Education Department
New Orleans Public Schools

Project Staff: Edith Kong-Lam, Coordinator
teacher team leader, social worker (part-time), communication disorder specialist, three teachers, three aides, parent trainer

Characteristics of Target Population:
The project serves 12 to 22 developmentally handicapped children aged 3 to 5 years in three self-contained classrooms in an elementary school. Handicapping conditions include multi-handicaps, developmental delays and autism.

Program for Children:
The program follows the Developmental Task Instructional System (Lillie, 1975) which involves needs assessment and the establishment of instructional objectives, curriculum activities and learning systems. The curriculum is organized around these developmental areas: gross and fine motor, language, conceptual, perceptual and social-emotional. The program operates 5 days a week for 5 hours per day. Consultants (physical and occupational therapists) provide auxiliary services.

Measures of Child Progress:
The project uses the Uniform Performance Assessment System (UPAS) initially as a pretest and biannually as a cumulative indicator of child progress. Each child's progress is recorded daily. The project staff administer the LAP and use the HICOMP curriculum.

Program for Parents:
The project emphasizes parent/family involvement. In addition to home visits, the parents and child visit the program prior to enrollment. Upon enrollment, the parents and staff write an individualized contract for family participation which includes these minimum requirements: weekly participation in the classroom, weekly or biweekly follow-up of preacademic exercises to be carried out at home, attendance at social events or workshops and development of appropriate skills by the parents.

Features and Products:
Local university students participate in the program as student teachers, occupational and physical therapists, and social workers. The project has developed a curriculum guide for dissemination. The project staff report on conferences and workshops and review cases and the project during weekly staff meetings. In addition, the staff allot time for inservice training and seminars, during which experts demonstrate materials and teaching techniques. Discussions in problem areas allow for teaching improvement and the recommendation of behavior management techniques by the teacher team leader.

EARLY EDUCATION PROJECT (EEP)

Address: Sandburg Learning Center
451 Meadow Hall Drive
Rockville, MD 20851

Phone: 301/762-2611
Year of Funding: 3

Fiscal Agency: Montgomery County Public Schools

Project Staff: Norma Edwards, Director; Barbara Hoffer, Coordinator/Liaison
Teacher; principal/center coordinator, three teachers, three instructional aides, two speech therapists, occupational therapist, physical therapist, parent coordinator

Characteristics of Target Population:
This noncategorical program serves 30 mildly to moderately handicapped children aged 2 to 5 years.

Program for Children:
The program provides services for children in two special centers within the Montgomery County Public Schools. Each class of 9 children has one teacher and an aide. An interdisciplinary team of therapists works with children individually and in small groups in the classroom and/or therapy room to provide a comprehensive program. When a child is ready to function in a less restrictive setting, the project staff provide liaison and follow-up services to the child and family to insure a successful transition. Some children are mainstreamed into a project-based Head Start classroom.

Measures of Child Progress:
EEP assesses children within the first 30 days after entry and again at program exit. The project uses the LAP-Diagnostic primarily for planning instruction. The project administers the California Preschool Social Competency Scale biannually; the project also uses the Bayley and the McCarthy. Therapists use additional instruments as needed.

Program for Parents:
EEP completes a parent needs assessment when the child enters the program. The parent coordinator designs and implements activities to meet the identified needs. School- based activities include participation in discussion and topical groups. Home activities include home visits and home-school activity sheets.

Features and Products:
The project is a training site for George Washington University's Special Education/Early Childhood master's interns. In addition, the project offers training in model classrooms to local high school students enrolled in child development classes. EEP has developed a videotape series that follows the development of six project children over the course of a semester. The tapes are used at inservice workshops to instruct observers in child development, informal diagnostic assessment, formal evaluation, interdisciplinary curriculum, parent interviews and mainstreaming readiness.

COGNITIVE DEVELOPMENTAL INTERVENTION PROJECT FOR DISORDERED CHILDREN

Address: 11 Wyman Street
Boston, MA 02130

Phone: 617/522-5434
Year of Funding: 2

Fiscal Agency: Language and Cognitive Development Center

Project Staff: Arnold Miller and Eileen Miller, Directors; Richard Linguori, Coordinator; research associate

Characteristics of Target Population:
The project serves a maximum of 20 children aged 2 to 8 years who have no sensory or major physical defects but are characterized by major disturbances in the following areas: behavior organization, contact with the environment, social-emotional contact with adults and children, and communication. The children are nonverbal, autistic and brain damaged.

Program for Children:
The program employs a cognitive developmental approach using adapted sign language and intervention in the major disturbance areas. The year-round, center-based program operates 22½ hours per week; four additional hours per week are devoted to home outreach. The program uses a structured, individually designed curriculum concurrently with less structured psychotherapeutic interventions.

Measures of Child Progress:
A quarterly evaluation cycle uses videotaped observation profiles, standardized tests including Bayley, Binet, McCarthy and Vineland, and language tests such as the ACLC and IPTA. These are administered yearly on a pre/post basis. The project also uses narratives from head teachers, therapists, social workers and outreach staff.

Program for Parents:
Parents meet four hours per week at the center and participate in training on educational and psychotherapeutic techniques, classroom training and individual or group meetings. The project offers sign language classes to all interested parents.

Features and Products:
The project will refine the existing curriculum and model development for incorporation within public schools and specialized treatment centers. The major outcome of the project will be the development of an observer-based, developmentally organized behavior profile for disordered children. Available are Sign and Spoken Language, a pre-reading series, and Symbol Accentuation, a reading program, developed by the directors prior to HCEEP project status. A unique system of wooden board structures provides an opportunity for sensory motor development and sets the stage for gestural and spoken word opportunities.

PROJECT WELCOME

Address: 333 Longwood Avenue
Boston, MA 02115

Phone: 617/735-6939
Year of Funding: 1

Fiscal Agency: Wheelock College

Project Staff: Linda Gilkerson, Director
medical director, two social workers, parent coordinator, parent/infant educator, early intervention liaison, nurse consultant, administrative assistant

Characteristics of Target Population:
The project is a coordinated hospital/community model program serving infants admitted to newborn intensive care units (NICUs) in Boston, who have handicapping conditions or a high risk of developing handicapping conditions, and their families. Project WELCOME is a joint endeavor of Children's Hospital Medical Center and Wheelock College,

Program for Children:
The program for high-risk infants links the family, neonatal intensive care unit (NICU), community hospital and community agencies (including the visiting nurses associations and early intervention infant programs) into a coordinated system of continuous service. This program features a nursery-based developmental program, coordinated discharge planning, continuous family support through a family contact person, and jointly developed referral systems.

Measures of Child Progress:
The project uses the Brazelton, Bayley Infant Scales (6 and 12 months) and observation of parent/infant interaction to assess child progress.

Program for Parents:
The family support program provides needs assessment, social services, a parent-to-parent program, an extended contact program and parent education classes designed to help parents meet the special needs of their high-risk infants.

Features and Products:
A parent of a high-risk infant serves as the parent coordinator and is involved in developing manuals for other parents and professionals. Other products include a curriculum for a continuing education course for nurses, a nurse's guide to infant development, a manual on discharge planning, a physician's packet of readings, a health-care provider's director to early intervention, and a hospital/community-based referral system for high-risk infants. The project's liaison program involves information dissemination, referral consultation and continuing education for health care professionals regarding the developmental needs and services available for high-risk infants and their families.

SIDE BY SIDE

Address: 197 Federal Street
Greenfield, MA 01301

Phone: 413/774-2243
Year of Funding: 3

Fiscal Agency: Franklin County Educational Collaborative

Project Staff: Barbara Carle and Dorothy Molnar, Co-Directors
three classroom teachers, three assistant teachers

Characteristics of Target Population:
The project serves eleven children aged 3 to 5 years with moderate to severe handicaps. The setting is an integrated preschool with nine nonhandicapped children aged 3 to 5 years. Handicapping conditions include cerebral palsy, spinal bifida, epilepsy and developmental delays.

Program for Children:
The program is dedicated to the principle of integrated education as the child's first school experience. The major goals are to foster a strong self-image, to encourage independence in thought and action and to build positive relationships. The curriculum sources are Montesorri and Mary Wood.

Measures of Child Progress:
The project administers the Bayley Scales of Infant Development and the McCarthy Scales of Children's Abilities to children under 3 years and children over 3 years, respectively, before program entry and again at the end of the school year. The project administers a standardized child development checklist to the handicapped population at regular intervals during the school year.

Program for Parents:
Parents of both handicapped and nonhandicapped children participate in the parent program, which provides the opportunity for parents to support one another and demonstrate acceptance of children with special needs. Activities include potluck meals at school, a weekly swim program and bimonthly informal meetings. Parent-teacher conferences are held at least twice a year, and teachers are available for an hour each day for telephone conferences. A home-teaching program reflects the concerns of parents of special children and addresses such topics as education, health and family welfare.

Features and Products:
The project has developed slide-tape shows dealing with the aspects of integrating young children with special needs and about the parent program at SIDE BY SIDE. Also available is a poster/pamphlet illustrating the integrated program for young children.

PERKINS INFANT/TODDLER PROGRAM (0-3)

Address: 175 North Beacon Street
Watertown, MA 02172

Phone: 617/926-4443
617/926-4447

Year of Funding: 1

Fiscal Agency: Perkins School for the Blind

Project Staff: Charles E. Woodcock, Director; Sherry Raynor, Coordinator
social worker/parent liaison, home teachers, occupational therapist, physical therapist, speech teachers, psychologist, secretary

Characteristics of Target Population:
The project serves 10 to 12 visually handicapped infants aged birth to 3 years and their parents or principal caregivers. The children are legally blind or have a visual impairment severe enough to call for evaluation, modification of equipment or environment, special techniques, understanding and materials to adapt better to the home or future school setting.

Program for Children:
The project initiates a home-teaching program stressing parental involvement and a parent and infant group experience program at the school for at least one afternoon per month. The objectives for the children's growth are facilitated by the development of a "life-learning" curriculum. These learning activities will use the child's natural environment -- the home and neighborhood, family, extended family and community -- rather than just objects brought from the school to the home.

Measures of Child Progress:
To measure child progress, the project uses the Maxfield-Buchholz Social Maturity Scale for Blind Children, Vision Up, the Oregon Project for Visually Impaired and Blind Preschool Children (Preliminary Edition), observation and parent report.

Program for Parents:
Services to parents include home teaching, center-based participation, support services, information exchange, and planning and evaluation.

Features and Products:
Monthly meetings allow for the use of a home-like setting for instructional purposes.

DETROIT PRESCHOOL PUPIL/PARENT/PROFESSIONAL READINESS PROJECT

Address: Schools Center Building
5057 Woodward Avenue, Room 1016
Detroit, MI 48202

Phone: 313/494-1634
Year of Funding: 2

Fiscal Agency: Detroit Public Schools

Project Staff: Beverly J. Johnson, Director; Sharon K. Finnerty, Coordinator
primary A teacher, developmental preschool teacher, secretary, special eduction aide

Characteristics of Target Population:
The project serves 20 educable mentally impaired (EMI) pupils aged 3 to 7 years typifying health, socioeconomic, educational and cultural problems of the school district.

Program for Children:
The project operates two classrooms: one serves children aged 3 to 5 years; the other serves children aged 5 to 7 years. To facilitate mainstreaming with nonhandicapped peers, both classrooms and the Head Start program are located in the same building. Project staff use the language experience approach to develop language and reading skills.

Measures of Child Progress:
Classroom teachers use the Multicultural Inventory during a three-week period to assess children entering the program and those returning for the semester. Objective-referenced tests measure progress in the classroom between semesters. Primary A children participate in city-wide achievement testing.

Program for Parents:
The project conducts monthly parent education workshops and field trips. Parents observe in the classroom and may serve on the advisory council, parent guild or as classroom aides.

Features and Products:
Home Activity Packs provide continuation of language development at home. The three-part Parent-Child Sensory Experience Lesson complements the parent-child field trips. In addition, the project publishes a monthly newsletter.

THE EARLY INTERVENTION PROGRAM BIRTH TO 5

Address: SPARKEY Center, Wilson School
1225 South Wildwood
Westland, MI 48185

Phone: 313/722-3232
Year of Funding: 3

Fiscal Agency: Wayne Westland Community Schools

Project Staff: Liz Cromwell, Director; Kathy Poole, Coordinator
four teacher consultants, five teachers, speech therapists, two psychologists, social worker, nurse, occupational therapist, physical therapist, learning disabilities consultant, five paraprofessionals

Characteristics of Target Population:
The project serves 130 to 140 children aged birth to 5 years and parents who are eligible in all areas of special education as defined by the mandatory education guidelines for handicapping conditions in Michigan. These areas include educable mentally impaired, trainable mentally impaired, severely mentally impaired, SMI (severely multiply impaired), emotionally impaired, physically and otherwise health impaired, learning disabled, deaf and hard of hearing and severe speech and language impaired.

Program for Children:
A teacher consultant visits children aged birth to 2 years and creates a developmental home curriculum programming for the handicapping condition. In addition, a family member attends a group at the center once a week. A multidisciplinary team plans appropriate activities for child and adult. The project offers three- and four-year-old children multidisciplinary classroom situations for five half days. SMI classes are pure and run all day. The classrooms provide an instructional management system with individual, small-group and large-group activities. Project staff visit the home once or twice a month, depending on the needs of the child and family.

Measures of Child Progress:
The project administers to each child the ISMIRRD and the Zimmerman Preschool Language Scale. In addition, the social worker writes a developmental history and makes a psychological observation of the child upon entry into the program. Project staff also compile medical and other agency information. After enrollment into the classroom, the project completes a LAP and other curriculum assessments. Individual goals, objectives and activities are written and monitored daily and weekly. The project administers the LAP as a posttest in the spring, and reviews each child annually.

Program for Parents:
The Parent-Family component includes home visits, meetings, participation in the classroom and parent decision-making through the parent group and the Advisory Council.

Features and Products:
A parent notebook and curriculum guides for children and home visits will be available Fall 1981. A slide presentation of the program will also be available at that time.

PROJECT RURAL

Address: Speech and Hearing Center
Box W-1340
Columbus, MS 39701

Phone: 601/328-9601
Year of Funding: 3

Fiscal Agency: Mississippi University for Women

Project Staff: Francis A. Griffith, Director
educational audiologist, language specialist, two classroom teachers, two classroom aides, interagency/parent coordinator

Characteristics of Target Population:
The project serves up to 10 language delayed/disordered children and 8 hearing impaired children at any one time. These children must be between the ages of 2 and 7 years and meet Mississippi State Department of Education requirements for primary handicapping conditions. Language delayed/disordered children must have essentially normal hearing in at least one ear.

Program for Children:
The children attend a half-day classroom program 4 days weekly, with the fifth day reserved for home visits or other activities with parents. The project staff attend primarily to language development but provide supplemental activities to develop other areas (cognitive, social, self-help and motor). Some daily interaction with nonhandicapped preschool children occurs.

Measures of Child Progress:
The primary means of measuring child progress is sample analysis. The project has used development sentence scoring, Content, Form and Sequence Analysis, and other measures. The staff gather data weekly, and formal criterion-referenced and norm-referenced instruments supplement the data from sample analysis. Formal instruments used include the Denver Developmental Screening Test, the Portage Guide Checklist, the Fisher Logan Test of Articulation, Test of Language Development (TOLD), and Preschool Language Scale, among others.

Program for Parents:
Mechanisms are in place to help determine parent needs, and a variety of activities are either proposed or available to meet these needs. Home visits have been very effective in communicating information to parents, in uncovering concerns, and in transferring child skills to the home setting.

Features and Products:
The project has developed curricula for both classrooms, and these curricula will soon be available for large-scale distribution. Various slide-tape, video and print materials will be ready for dissemination in Spring 1981. Also, a community and university multidisciplinary evaluation team will become operational during Spring 1981.

HANDICAPPED CHILDREN'S EARLY EDUCATION PROGRAM

Address: Route 7, Box 21
Philadelphia, MS 39350

Phone: 601/656-5251
Year of Funding: 1

Fiscal Agency: Mississippi Band of Choctaw Indians

Project Staff: Louise Wilson, Director; Wanda Kittrell, Coordinator research and instructional aide, secretary

Characteristics of Target Population:
The project serves handicapped Choctaw Indian children aged birth to 8 years.

Program for Children:
Handicapped children presently receive services from a variety of educational and social service programs. This project focuses on parent training and orchestrates a multi-staff, multi-program effort to serve young handicapped children. Prekindergarten, kindergarten and primary school instructional materials will be translated into Choctaw.

Measures of Child Progress:
Children will be assessed with the DDST, McCarthy and Bayley which are being translated into Choctaw. When appropriate, the staff will use other assessment tools in the following areas: oral expression, listening comprehension, basic reading skills, math calculation/reasoning and written expression.

Program for Parents:
The project is developing a curriculum for parents which will include an "expectant mother" basic information program. The project will hold parent seminars throughout the school year for parents of handicapped children, and parents of school-aged children will be asked to join a "Parents' Auxiliary" designed to aid in crisis intervention.

Features and Products:
The program seeks to combine, coordinate and expand the services available to handicapped Indian children through the Indian Health Services, Head Start, Follow Through and the Special Education Program in six BIA elementary schools. The program will develop special education services, including bilingual instructional materials, for an Indian reservation in a rural setting, involving a bilingual and cultural minority community.

PEARL RIVER INFANT PROJECT

Address: P.O. Box 178
Picayune, MS 39466

Phone: 601/789-8859
601/868-2923
Year of Funding: I

Fiscal Agency: South Mississippi Retardation Center

Project Staff: Mary Marcia Yoder, Director; Marilyn Weston, Administrator
two special education teachers, speech therapist, parent educator, physical therapist assistant, physical therapist consultant

Characteristics of Target Population:
The project serves 25 developmentally disabled children aged birth to 5 (6 if not eligible for public schools) residing in Pearl River County, Mississippi.

Program for Children:
The project serves the children in both home and center, with the home-bound children gradually phased into the center. The project has adapted Project RISE, the Portage Project and the Small Wonder Kit into the program curriculum. The project uses a transdisciplinary approach with home-bound infants and an interdisciplinary approach with center-based infants.

Measures of Child Progress:
A team consisting of a psychologist, special educator, speech language therapist, nurse, dietician, pharmacist and social worker conducts the initial comprehensive interdisciplinary evaluation. Further evaluation by the center staff includes the Early LAP, pre and post-REEL and observation. IEPs will be written for each child, with an evaluation goal every 6 months and a complete evaluation at the end of each year.

Program for Parents:
Upon placement recommendation by the diagnostic and evaluation team, the parent educator makes a home visit to assist parents in completing the admission and medical forms. When the child's IEP is written, the parents contract to come to the center for a specified number of hours of training to enable them to continue the infant's programs in the home. The staff conducts parent training in the form of workshops and one-on-one consultation. Parent assessment in pre and posttest knowledge forms is used to evaluate the parent education component.

EARLY INTERVENTION PROGRAM

Address: Department of Special Education
515 South Sixth Street
Columbia, MO 65211

Phone: 314/882-3741
Year of Funding: 3

Fiscal Agency: The Curators of the University of Missouri

Project Staff: Sandra W. Gautt, Director; Ruth Friar, Coordinator
classroom managers, home interventionist, community liaison, speech/language pathologist

Characteristics of Target Population:
The program serves 18 children aged 20 months to 5 years who have a significant delay in one or more areas of development and/or who have a known syndrome or high risk characteristics resulting in learning and/or behavior problems.

Program for Children:
The project staff develop individual educational programs (IEPs) using various curricula, including Teaching Research. These IEPs are based upon data obtained through criterion referenced assessments and systematic observation techniques. The staff implement instructional programming through a data-based management system. Program options include four half-day sessions per week in a self-contained or integrated classroom model, weekly instructional home visits supplemented by monthly visits to the center, and instructional and/or behavioral support programming provided to children enrolled in community day care and preschool programs through a technical assessment model. Consultants provide ancillary services from other University departments and community agencies.

Measures of Child Progress:
The project staff use both norm- and criterion-referenced measures to evaluate child progress. The staff administer the Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities when a child enters the program, at 6 month intervals and when the child leaves the program. A multiple baseline design based on daily performance data is used to obtain continuous progress data.

Program for Parents:
Parents participate in all aspects of the program: assessment, planning, intervention in the home and center, decision making and program evaluation. The staff provides parent education and training through individual sessions and monthly parent meetings. The Community Liaison Teacher assesses parental and family needs and develops an individualized plan for meeting these needs.

PROJECT IMPACT

Address: 3930 Lindell Boulevard
St. Louis, MO 63108

Phone: 314/534-9350
Year of Funding: 3

Fiscal Agency: Family Resource Center

Project Staff: Phyllis A. Rozansky, Director; Nancy McMillan, Coordinator
two educational therapists, one family therapist, two educational assistants, diagnostician, driver

Characteristics of Target Population:
The project is capable of serving 20 children aged 2½ to 5 years, 10 in each classroom session. It is designed for children with developmental delays or behavior problems whose parents are willing to receive an hour of parent training per week. Families are referred to the agency because of actual or potential child abuse or neglect.

Program for Children:
The children undergo a diagnostic assessment consisting of observation, standardized tests and a parent-child interaction session. The subsequent IEP is implemented in the therapeutic classroom in daily, 3-hour sessions. The classroom curriculum is a therapeutic-developmental program emphasizing the emotional-social and language areas where children experience significant problems and delays.

Measures of Child Progress:
The project staff administer DDST, PPVT, baseline and progress (6-month intervals) for screening, and the Behavior Questionnaire and Child Outcome List for posttesting.

Program for Parents:
Parents practice interaction skills during weekly parent-child sessions in a simulated home environment. These sessions are also scheduled in the classroom and at home. In these sessions, videotaping is one of the primary teaching tools. In addition, the project provides family therapy and support services.

Features and Products:
The program uses a therapeutic and educational model for teaching abused and neglected children and their families.

BIG SKY EARLY EDUCATION CENTER

Address: 401 Social Science Building
University of Montana
Missoula, MT 59812

Phone: 406/243-5467
Year of Funding: 1

Fiscal Agency: Montana University Affiliated Program

Project Staff: James Pezzino, Director
special education teacher

Characteristics of Target Population:
The project serves 15 handicapped children aged birth to 5 years who live in predominantly rural areas in and around Missoula.

Program for Children:
The Big Sky Project delivers services either in home-based or in a combination home- and center-based settings. Plans include demonstration of services in more fully integrated community-based settings during the second and third years of funding. The project staff design programs according to each child's strengths and needs, parent input and accessibility. The project staff develop an individualized daily program which covers major developmental areas for each child. A speech therapist, occupational therapist, physical therapist and psychologist provide ancillary services.

Measures of Child Progress:
Project staff and parents collect daily, weekly and monthly measurements of progress to assess criterion levels of performance on children's individualized objectives. In addition, the staff use several normative (Bayley or McCarthy) and criterion-referenced (Brigance, CAMS Placement Test) instruments to assess child progress quarterly or biannually.

Program for Parents:
Parents are involved in designing their child's IEP and carrying out instructional programs in the home and center. Individual and group parent training programs are also available. The project, with community-based agencies, provides greater accessibility to support groups and community and state social service resources for parents.

Features and Products:
The project operates in close cooperation with community-based, state-funded projects that serve handicapped preschoolers in seven rural counties in Montana. Forthcoming products will address the improvement of service delivery in rural locales.

PRESCHOOL SUPERMARKET

Address: Bozorth Early Childhood Center
Glassboro, NJ 08028

Phone: 609/445-6285
Year of Funding: 2

Fiscal Agency: Glassboro State College

Project Staff: Barbara A. Wear, Director; Geraldine W. Scott, Assistant Director
four head teachers, four assistant teachers, secretary, administrative assistant

Characteristics of Target Population:
The project serves thirty children aged 11 months to 5 years from the South Jersey area.

Program for Children:
This diagnostic/prescriptive program uses a developmental curriculum. The project offers four program strategies: two integrated morning programs with equal numbers of handicapped and nonhandicapped children meeting four or five days a week; two intensive specialized services program for more severely impaired youngsters meeting three or four times a week; a home-based program; and the Preschool Family Resource Center, which provides training for families (as well as college students and the community) through a workshop series, counseling groups and a lending library. The decision regarding placement into the strategies gives equal consideration to the needs of the child and the needs and desires of the caregiver(s).

Measures of Child Progress:
The project conducts pre and posttests and monitors children through the Vulpe Assessment Battery. The children receive pediatric developmental evaluations and assessments from project consultants according to needs.

Program for Parents:
Parents are involved in all program components from the initial screening to final evaluations. Activities offered through the Preschool Family Resource Center are designed to meet individual, family and group needs determined from questionnaires and concerns articulated in a Family Education Plan.

COGNITIVE LINGUISTIC INTERVENTION PROGRAM (CLIP)

Address: 22 Valley Road
Montclair, NJ 07042

Phone: 201/783-4000 x272
Year of Funding: 3

Fiscal Agency: Montclair Board of Education

Project Staff: Mary C. Vernacchia, Director
learning disabilities teacher/consultant, two speech/language pathologists, parent/staff training specialists, evaluator

Characteristics of Target Population:
The program serves 45 children aged 4 to 6 years who demonstrate risk of cognitive disabilities in language. Children are selected from the Montclair Public School population. The project provides outreach inservice training for parents and teachers of 2- and 3-year-old children in community agencies.

Program for Children:
The goal of the program for children is to facilitate cognitive and language development. A combination of center-based (3½ to 6 years), home-based (2 to 5 years) and community-based (2 to 4 years) programs provides services to children. In both center-based and community-based programs, handicapped children are integrated with nonhandicapped children. The project serves children (2 to 3½ years) at home who are not enrolled in a group situation. The Psycho-Educational Center, Montclair State College and CLIP staff provide diagnosis and assessment.

Measures of Child Progress:
The project uses the Preschool Language Assessment Instrument and the Criteron-Referenced Inventory of Developmental Tasks (developed by the Montclair Public Schools) for identification and assessment. Project staff assess each child's mastery level for each language and conceptual goal prior to instruction and reevaluate children at mid-year and at the end of the school year. Assessment of mastery level for fine motor skill goals occurs at the same three intervals. Comparing the mastery of language and conceptual (L-C) skills taught with the mastery of skills not taught (fine motor) ,FM., the project uses each child as his or her own control for measuring the effects of instruction. The staff completes the percentages of L-C and FM goals showing no mastery, partial mastery or complete mastery at the three evaluation periods for each child and the entire group. Descriptive and statistical analyses are used to compare progress in the mastery of L-C goals to progress in the mastery of FM goals.

Program for Parents:
CLIP acquaints parents and family with concepts of child development, increases their understanding of the child's handicap and develops effective coping skills to handle behavior. Family activities include workshops, individual and group conferences, classroom participation, lectures, films and videotapes. CLIP specialists conduct home visits when appropriate.

Features and Products:
The program is a collaborative effort by the Montclair Board of Education and Montclair State College. CLIP is a field training site for students in speech/language pathology and learning disabilities. In addition, CLIP offers a 6-week summer language program, providing a continuous learning experience for target children.

ALBUQUERQUE SPECIAL PRESCHOOL INTEGRATION PROJECT

Address: 3501 Campus N.E.
Albuquerque, NM 87106

Phone: 505/266-8811
Year of Funding: 3

Fiscal Agency: Albuquerque Special Preschool

Project Staff: Gail Beam, Director
three teachers, two classroom aides, disseminator/client services coordinator, outreach and evaluation coordinator, secretary

Characteristics of Target Population:
The project serves 18 mild to moderately retarded/developmentally delayed children aged 3 to 5 who may also have chronic health problems and/or sensory deficits. These children are served in several types of classrooms with nonhandicapped children aged 2 to 4.

Program for Children:
Handicapped and nonhandicapped children are integrated in two on-site classrooms where the ratios of handicapped to nonhandicapped vary, as do the number of teachers and their special areas. Both levels use a developmentally sequenced curriculum with speech and occupational therapy support services. In addition, five children are mainstreamed in three regular preschools throughout Albuquerque. These children receive the therapeutic services from Albuquerque Special Preschool. Cross-training is achieved through team-teaching and technical assistance provided for the staff in the outreach sites.

Measures of Child Progress:
The project staff use the Alpern-Boll as a pre and post-measure; they administer the Learning Accomplishment Profile quarterly as a teaching and assessment tool. Attainment of a child's IEP goals are used to measure progress. Language development is assessed by pre and posttesting using the REEL and/or the PPVT. In addition, the staff conduct extensive research on the play behavior of the children; areas of study include the level of play, time spent in each level, the degree to which the children initiate interactive play, and whether handicapped and nonhandicapped children play together.

Program for Parents:
Goals for parents are to increase the awareness and acceptance of handicapping conditions and to improve parental skills and attitudes. Parents receive newsletters, are encouraged to participate in parent classes designed to meet stated needs, in IEP development, to visit or volunteer in their child's class and to conference regularly with members of their child's educational/therapeutic team.

Features and Products:
Another preschool for handicapped children in Albuquerque has replicated the Level I component of the project, using a team-teaching approach. Play behavior study results of the model will be available in late 1981. A Teaching Guide for Integrating Handicapped and Non-Handicapped Children will be available in August 1981.

INFANT AND TODDLER LEARNING PROGRAM

Address: Bronx Developmental Center
1200 Waters Place
Bronx, NY 10461

Phone: 212/430-0673
Year of Funding: 3

Fiscal Agency: City College of New York
City University of New York Research Foundation

Project Staff: Kathryn LeLaurin, Director; Carolyn Waggoner, Coordinator
head teacher, three paraprofessionals, driver, physical therapist, speech therapist, occupational therapist, social worker

Characteristics of Target Population:
The project integrates 17 handicapped and 13 nonhandicapped children aged birth to 3 years. The handicapped children have Down's syndrome, spinal bifida, cerebral palsy or are at risk for developmental problems (children born prematurely, weighing under 1500 grams).

Program for Children:
The project is a center-based, developmental and educational day care program. The program is open five full days per week and provides complete rehabilitation (OT, PT, speech), educational evaluations and interdisciplinary goals and activities planning. Team members further develop goals drawn from the Vulpe and follow the normal sequence in all domains. The infant component is more individualized than the toddler group, which follows a typical preschool schedule modified to meet the developmental needs of children under aged 3 years.

Measures of Child Progress:
The project administers the Griffiths Developmental Scales every six months and the Vulpe Assessment Battery every three months. Project staff take daily observational measures of selected aspects of child performance.

Program for Parents:
Parents participate in 15 to 18 individualized training sessions on child growth and development, in quarterly IEP updates with program and rehabilitation staff and in counseling groups with an agency social worker. In addition, parents are involved in Advisory Board fund-raising, demonstration/dissemination and advocacy subcommittees, as well as a parents' organization which sponsors social events and offers individual support for new families.

Features and Products:
The program integrates handicapped and nonhandicapped children under the age of 3 years in a full day program. The project has developed procedures manuals on all aspects of program functioning and is conducting research on classroom organization, the effects of intervention on child development and methods of continuous child progress assessment. Project staff have expertise in working in a multicultural environment.

DEVELOPMENTAL INFANT PROGRAM IN HOSPITAL AND HOME (DIPHH)

Address: Kingsbrook Jewish Medical Center
DMRI-341
Rutland Road and East 49th Street
Brooklyn, NY 11203

Phone: 212/756-9700 x2284
212/960-8173
Year of Funding: 2

Fiscal Agency: Research Foundation CUNY on behalf of Herbert H. Lehman College

Project Staff: Shirley Zeitlin and Frieda Spivack, Co-Directors
nurse practitioner, physiotherapist, language specialist, social worker, clerk typist

Characteristics of Target Population:
The project serves 20 severely handicapped multiethnic children aged birth to 5 years and their families. The children are from an urban area and have chronic medical conditions requiring long-term hospitalization, recurrent hospitalization or continuing involvement with the hospital outpatient clinic.

Program for Children:
The educational program, based on the developmental interaction Model for Personalized Learning, comprises a hospital program for chronically ill children and a program for children at home. The project attempts to increase the child's developmental skills and ability to cope more adaptively. Teacher interns, supported by the multidisciplinary team, work three days a week with the hospital children and once a week with the home children. The project uses the Curriculum for Developmental Education. The project integrates children with nonhandicapped siblings and other hospitalized children during a Saturday morning play group.

Measures of Child Progress:
The project uses the Assessment of Basic Capabilities (Spivack), the Coping Inventory (Zeitlin), observations and videotaping to develop personalized learning plans and to measure progress biannually.

Program for Parents:
The parent program increases the parents' ability to cope with the child by increasing understanding of the child's special needs, their own and their family's needs as the result of having a special child.

Features and Products:
Available products are:
- The Manual for the Development and Implementation of Personalized Learning Plans
- Parent Support Parent Program Manual
- Adaption of the Coping Inventory
- Assessment of Basic Capabilities (Specific and Severe Handicaps)

The project uses videotapes for awareness and staff training.

ELMIRA MOBILE RESOURCE TEAM

Address: 301 Hoffman Street
Elmira, NY 14905

Phone: 607/733-0883
Year of Funding: 3

Fiscal Agency: Elmira City School District

Project Staff: George J. Welch, Director; Livia M. Trexler, Coordinator
speech/language therapist, parent consultant/teacher, occupational therapist, secretary

Characteristics of Target Population:
The project serves approximately 25 children aged 3 to 6 years handicapped in two or more areas of development. All children reside in the Elmira City School District. Handicapping conditions include Down's syndrome, speech-language impairments, sensorimotor deficits, visual perception problems and mental retardation.

Program for Children:
The team provides speech, language and occupational therapy, home/school services and resource support emphasizing early learning activities. The project provides services in cooperation with area preschool programs and community agencies. Handicapped children participate in an integrated setting with nonhandicapped children. The project provides a transition system for successful entry into the public schools. The program is based on the individual needs of the child; project staff develops individual educational plans to meet these needs.

Measures of Child Progress:
The DDST, the Stanford-Binet--form LM, Zimmerman Preschool Language Scale, DeGangi Assessment of Sensorimotor Integration, and the LAP-D provide baseline data for each child in the program. The project uses a wide variety of other assessment tools, including the Mobile Resource Team Developmental Inventory, for further evaluation as needed. The evaluation of each child's performance is an ongoing observation and documentation process. In adition to the IEP, progress reports on an updating of the LAP-D are written twice a year.

Program for Parents:
The parent program informs and guides parents in appropriate management and intervention techniques. Parent involvement activities include parent group meetings, newsletters, home visits, advisory committee, workshops and progress review conferences.

Features and Products:
The Mobile Resource Team has developed several strategies for children's transition into school-age programs. The project has also developed interagency cooperation as the vehicle for maximized services. The Procedures Packet is available for demonstration purposes.

HOSPITAL EDUCATIONAL LIAISON PROGRAM (HELP)

Address: 144-61 Roosevelt Avenue
Flushing, NY 11354

Phone: 212/939-8700
Year of Funding: 3

Fiscal Agency: Shield Institute

Project Staff: Ellen A. Palermo, Director; Barbara Bach, Coordinator
social worker, research assistant, nurse, psychologist

Characteristics of Target Population:
HELP serves approximately 60 infants aged birth to 3 years who are identified as at-risk for a handicap or developmntal delay.

Program for Children:
The project initially screens children and parents to determine baseline behaviors and needs. For all infants, the project staff complete individualized programs of play activities appropriate to the child's developmental needs.

Measures of Child Progress:
The project uses the Bayley Scales and developmental curriculum to assess child progress at point of referral and at ages 4, 9, 18 and 30 months.

Program for Parents:
Parents participate in the planning and implementation of their child's IEP. Project staff schedule home visits regularly to monitor the child's development. All parents receive a "baby book" which contains suggested play activities and pictures of their baby during the suggested activities. To provide mutual support for families in social settings, the project offers family nights.

Features and Products:
The project has developed a curriculum from many standard sources (Bayley Scales, LAP, etc.) and the "baby book," a record of the babies' progress and a demonstration reminder for parents.

PARENT INVOLVEMENT PROGRAM (PIP)

Address: 231 Roberts Building
Jamestown, NY 14701

Phone: 716/483-0214
Year of Funding: 2

Fiscal Agency: United Cerebral Palsy Association of New York State, Inc.
Southern Tier, West Division

Project Staff: Marilyn Johnson, Director; Sylvia Calla, Coordinator
home teachers, two occupational therapists, physical therapist, secretary

Characteristics of Target Population:
PIP serves 24 handicapped or developmentally delayed children aged birth to 3 years.

Program for Children:
The project provides psychological, audiological, speech, occupational therapy and physical therapy evaluations. In addition, the project provides direct educational services (Portage curriculum), occupational and physical therapy through home- and center-based programs.

Measures of Child Progress:
The project quarterly administers the Portage and Denver; the Bayley or McCarthy Scales are administered pre and posttest.

Program for Parents:
PIP operates a loan library for parents, teaches Portages' activities and provides advocacy services. A parents' group meets monthly.

Features and Products:
The OT, PT and special education teachers collaborate to achieve common service delivery goals and work together as an interdisciplinary team to coordinate services to children and their families. The home-based design of the program helps the staff overcome the transportation and communication problems faced in this rural service delivery area. Helping to resolve the same problem, the monthly parents' meeting informs parents of available service and their legal rights as parents of handicapped children.

BILINGUAL/MULTICULTURAL EARLY EDUCATION PROGRAM FOR MILDLY HANDICAPPED CHILDREN

Address: 2253 Third Avenue
Third Floor
New York, New York 10035

Phone: 212/284-6650
Year of Funding: I

Fiscal Agency: East Harlem Council for Human Services

Project Staff: Richard Terry, Director
special education superviser, special education teacher, social worker, psychologist, teacher aide, secretary

Characteristics of Target Population:
The project can serve 20 mildly to moderately mentally retarded or hearing, speech, visually or orthopedically impaired children aged 2½ to 6 years whose parents will commit themselves to weekly parent participation. The project offers all services on a bilingual/multicultural basis.

Program for Children:
The program consists of three bilingual/multicultural placements: a preschool handicapped program, a mainstreaming preschool program and a transitional kindergarten program. The project uses both a center- and home-based approach and provides health, education and social services.

Measures of Child Progress:
Each student receives a case study evaluation prior to placement in a program. The project administers the DDST, Vineland Social Maturity Scale, Bayley and McCarthy Scales in on a pre and posttest basis, using systematic data collection on all IEP goals and objectives.

Program for Parents:
Parent involvement activities include parent group meetings, parent/teacher conferences, newsletters, classroom observation and participation and advisory committee. During home visits, project staff focus on parent/child interaction and intervention techniques. The project encourages parents to participate in any and all project training.

Features and Products:
The project develops home assistance packets for each family to help with parent/child interaction and the transfer and reinforcement of the center-based IEP activities. Each family receives a scrapbook as a record of its project experience. Each week, teachers take snapshots and deliver pictures from the preceding week. The project has a community-based bilingual/multicultural delivery system (Spanish/English). To provide more time for those children who need it, the project offers a "buy-in" system for parents, when appropriate, and a "buy-back" system from the local kindergarten.

EARLY CHILDHOOD INTERVENTION PROGRAM

Address: Plainedge Primary School
North Baldwin Drive and Kentucky Avenue
North Massapequa, NY 11758

Phone: 516/997-8700
Year of Funding: 1

Fiscal Agency: Board of Cooperative Educational Service (BOCES) at Nassau County

Project Staff: Maureen Metakes, Director; Marilyn Wranek, Coordinator
social worker, psychologist, parent trainer, speech and language therapist

Characteristics of Target Population:
The project serves handicapped and high-risk children aged birth to 3 years, their parents and extended families.

Program for Children:
The program is developing a home/school model for early intervention using a transdisciplinary team approach which employs behavior modification techniques and observation strategies. Each child receives service in the school program a minimum of one day per week; however, the program continually reestablishes the home as the least restrictive environment appropriate to the child's development.

Measures of Child Progress:
The project uses the Bayley, the Cattell and Early LAP to assess child progress. Staff conduct formal assessments at 3- to 6-month intervals. Parents and staff conduct informal assessments on a regular basis.

Program for Parents:
The project considers parents the most important members of the teaching team. Parents are involved in both the school- and home-based components of the project. Important target populations for this program are the teenage mother and parents with low levels of education.

Features and Products:
Parents, staff and service providers are involved actively in the ongoing development of the program. The program maintains an ongoing and active relationship with major health, education and social service agencies in Nassau County.

EARLY INTERVENTION PROGRAM

Address: P. O. Box 374
Potsdam, NY 13676

Phone: 315/386-4506
Year of Funding: 2

Fiscal Agency: St. Lawrence-Lewis Board of Cooperative Educational Services (BOCES)

Project Staff: Edward A. Shafer, Director
clerk-typist, three teachers, two speech therapists, social worker

Characteristics of Target Population:
The project serves 30 children aged birth to 5 years who are handicapped as defined by P. L. 94-142 regulations. The project gives priority to severely handicapped children and serves children in a rural setting.

Program for Children:
A parent-child learning center and home program provide services to the children. Individualized educational programming focuses on social, motor, cognitive, self-help and linguistic skills. Parents and teachers together select goals using a variety of curriculum resources, such as the LAP, Portage Guide to Early Education and Oswego Company ARC curriculum.

Measures of Child Progress:
The project uses a rate of development or learning expectancy level to assess child progress. The following measures are used, depending on the child's age and area of difficulty: Bayley, McCarthy, Goldman-Fristoe Test of Articulation and Utah Test of Language Development. The project administers the Oswego ARC curricular evaluation to all children as a pre and posttest.

Program for Parents:
The project considers parents full and active partners in the education of their children and asks them to participate in 50% of the instructional activities. The project devises an individual family plan to reflect family perceptions of need and action plans. The goals for family participation are to increase parents' knowledge of their child's developmental needs, to promote a perception of status to be achieved through parenting, to provide specific information on successful adult-child interaction and to facilitate access to other community resources necessary to promote their own mental health and sense of well being.

A REGIONAL DEMONSTRATION PROGRAM FOR PRESCHOOL HANDICAPPED CHILDREN

Address: Fran[illegible]ll School
Yor[illegible]n Heights, NY 10598

Phone: 914/962-2377
Year of Funding: 3

Fiscal Agency: Putnam/Northern Westchester Board of Cooperative Educational Services (BOCES)

Project Staff: Amy L. Toole, Director
teacher trainer specialist, secretary

Characteristics of Target Population:
The project serves 125 children aged birth to 5 years who demonstrate a broad range of handicapping conditions and reside within 18 component school districts.

Program for Children:
Child services are a combination of home-based (aged birth to 5 years) and center- based (aged 3 to 5 years) approaches. Home training is based on the Portage Project model. The staff make weekly home visits to assist parents in working with their children. If a child attends a regular nursery school, day care or Head Start program, staff also visit these agencies. The half-day classroom program uses a prescriptive curriculum which combines a transdisciplinary and teacher consultation model, a Bloom and Lahey language development model, a positive social reinforcement and parent involvement approach into a structured classroom setting.

Measures of Child Progress:
The project administers the Bayley or McCarthy at the beginning and end of the school year. In addition, project staff collect data through analysis of the Transdisciplinary Assessment Parent interview, IEPs, Portage Behavior checklist and a variety of questionnaires.

Program for Parents:
Parent activities include counseling, monthly parent training sessions (topics are based on a parent needs assessment), individual parent conferences, participation in IEP development, classroom observation and completion of home-training prescriptions. Parents volunteer in the classroom program (using the Parent Volunteer System designed by the project) to maximize individualization in the classroom and to train other parents.

Features and Products:
Core elements of the program have been identified, and eight classroom programs have shown a high level of implementation. Unique features of the program include the curriculum, organizational structure and regional approach. In a norm-referenced evaluation design, project students demonstrated both statistically and educationally significant results when compared to the norm group. The following products are available:

- Curriculum Model
- A Guide for Creating Community Awareness and Developing Interagency Cooperation
- Classroom Directed Home Teaching Activities
- Preschool Project Manual
- The Parent Volunteer System: A Manual and Activity Catalog for Teachers

PROJECT TAP

Address: 1801 Fayetteville Street
Durham, NC 27707

Phone: 919/683-6509
Year of Funding: 1

Fiscal Agency: North Carolina Central University

Project Staff: Octavia B. Knight and Barbara K. McCloud, Principal Investigators
three project teachers, parent coordinator, secretary, consultants

Characteristics of Target Population:
The project serves 15 to 20 high-risk, mildly handicapped, developmentally delayed preschool children aged 3 to 6 years.

Program for Children:
Curriculum content is based on Thurstone's Primary Mental Abilities; curriculum process is composed of acquisition and generalization stages. The project uses the Carolina Developmental program. Demonstration classes are located in a local day care.

Measures of Child Progress:
The project uses the Developmental Indicator for the Assessment of Learning as a screening instrument and the McCarthy Scales of Children's Abilities as a pre and posttest for program evaluation. The Carolina Developmental Profile provides the basis for writing the IEP and planning the instructional program for each child.

Program for Parents:
The project provides a model training package for developing awareness in 10- to 12-year-old children concerning the potential dangers of early pregnancies and the relationship of early pregnancy to the birth of handicapped children. The FEED project approach will be used.

Features and Products:
The project provides extensive inservice training to day care workers in the state and region and encourages consortium efforts between this agency and two other traditionally black colleges.

KENDALL INFANT/TODDLER DEMONSTRATION PROJECT (KID)

Address: 4015 West Wendover Avenue
Greensboro, NC 27407

Phone: 919/294-4860
Year of Funding: 3

Fiscal Agency: Henry Wiseman Kendall Center

Project Staff: P. J. Coffin, Director
eductional specialist, mainstreaming coordinator, assistant teacher, home programmer, parent trainer, program evaluator, physical therapy consultant, secretary

Characteristics of Target Population:
The project serves 22 children aged birth to 3 years. Handicapping conditions include high risk for abnormal development, mildly or moderately retarded (with a priority for Down's syndrome), physical handicaps and visual impairments.

Program for Children:
The project provides center- and home-based programming (aged birth to 1½ years), structured classroom experience (aged 1½ to 3 years) and mainstreaming into community nurseries and preschools. The project also trains teachers who serve mainstreamed project children.

Measures of Child Progress:
KID staff assess children biannually using the Bayley, Vineland, physical therapy evaluations, Sequenced Inventory of Child Development, Carrow Elicited Language Inventory, REEL and LAP. Within the toddler classroom, the staff collect daily data on each child's IEP goals and update programs accordingly. The project collects systematic observations of social interactions in the mainstreaming centers.

Program for Parents:
Parents participate in a weekly training program, which includes observation of their children (accompanied by programmed feedback) and individual and group training in specific skill areas such as behavior analysis, child development, "mainstreaming and the law" and organization of group support systems. Periodic home visits augment the weekly sessions.

Features and Products:
The Kendall Center provides nurse and pediatric consultation, social work services, speech pathology, child development and behavior analysis consultation to the project. Several colleges and universities in the area provide volunteers to collect data in return for training opportunities.

PROJECT FOR MOTOR IMPAIRED INFANTS AND THEIR FAMILIES

Address: 281 Locust Street
Akron, OH 44308

Phone: 216/379-8256
Year of Funding: 2

Fiscal Agency: Children's Hospital Medical Center of Akron

Project Staff: Philippa Campbell and G. Dean Thomas, Co-Directors
physical therapist, occupational therapist, social worker

Characteristics of Target Population:
The project serves 25 infants under age 3 who are either diagnosed or at risk for motor development as a function of neurological causes. The children reside in the predominantly rural 17-county geographic region served by Children's Hospital Medical Center of Akron.

Program for Children:
Project infants receive neurodevelopmental therapy to facilitate sensorimotor skill acquisition. The project provides home-based services for the youngest infants and for those infants and families who cannot regularly visit the center. By age 3, children will move from home- or center-based motor intervention programming into integrated community-based preschool programs. The project follows children for one year after placement.

Measures of Child Progress:
The staff use the Index of Qualification for Specialized Services and Pattern Analysis Form to identify and assess the infants. Standard assessment procedures administered prior to entrance and again at yearly intervals include the Bayley, Uzgiris-Hunt and Pre-Speech Assessment Scale, in combination with ongoing performance assessments and other measures as appropriate.

Program for Parents:
The therapists and parents identify areas of parent concern in regard to the infant's motor progress. The project trains parents to work with their infant at home and analyzes their teaching using videotape. The staff social worker is available to meet with parents both individually and in group sessions.

Features and Products:
All staff members participate in orientation and training sessions on behavioral theory and technology, data collection systems, strong inference model and data-based decision making. The project provides ongoing training experiences through videotape analysis of therapist/infant interaction, weekly training sessions, attendance at professional meetings, workshops and seminars, participation in a weekly "journal" club and subsidized course work.

PEDIATRIC EDUCATION PROJECT

Address: 1580 Cannon Drive
Columbus, OH 43210

Phone: 614/422-8365
Year of Funding: 2

Fiscal Agency: The Nisonger Center
Ohio State University

Project Staff: Michael J. Guralnick, Director; Karen E. Heiser, Coordinator graduate assistant, national task force

Characteristics of Target Population:
Pediatric residents at eight test sites across the country participate in the one-month rotation developed by a steering committee and a national task force.

Program for Children:
The proposed curriculum is divided into twelve goal areas: child development; attitudes toward exceptional children; handicapping conditions; prevention; screening, diagnosis and assessment; interdisciplinary team; management; parents; community resources; health and medical care; developmental, educational and psychological research; and legal and legislative aspects. Full implementation will occur during the second year; formal testing, during the third year.

Measures of Child Progress:
For the purposes of both instruction and evaluation, the project is developing instructional models of managing patients. Each goal area has several objectives with associated evaluation mechanisms such as objective tests, clinical observations and apprenticeship programs.

Program for Parents:
A major goal of the project is to inform pediatric residents about parental concerns and techniques for effective communication.

Features and Products:
The project has compiled a mailing list of all interested pediatricians in the United States and informs these physicians of current project activities through periodic mailings. The physicians can participate in the curriculum development process through critique of goal areas of particular interest to them. The project will be producing a detailed, flexible and validated curriculum.

PRESCHOOL CONDUCTIVE HEARING IMPAIRMENT LANGUAGE DEVELOPMENT (PRESCHOOL CHILD)

Address: McKesson School
1624 Tracy
Toledo, OH 43605

Phone: 419/666-5180
Year of Funding: 2

Fiscal Agency: Toledo Public Schools

Project Staff: Carol Quick, Director; Helen Orringer, Coordinator
speech/language therapist, developmental language teacher, audiologist, psychologist, social worker, pediatrician, consultant

Characteristics of Target Population:
The project serves approximately 50 children aged birth to 5 years with linguistic handicaps secondary to recurrent otitis media. Children enrolled must have normal development in all areas but language, confirmed language delay, audiological and medical documentation of recurrent otitis media and no evidence of a sensori-neural hearing loss.

Program for Children:
The project provides a coordinated triad of services including medical treatment of the otitis condition with ongoing audiological monitoring, supportive parent education and individualized child language development programs for implementation in the home or preschool. The curriculum focus is on meeting the auditory processing needs of the target population.

Measures of Child Progress:
The project administers the Merrill Palmer Test and audiometric screening and impedance testing upon admission to the program. To children with language above 36 months, the project administers the Sequenced Inventory of Communication Development, Allied Agencies Developmental Scales and Goldman-Fristoe Test of Articulation six to eight weeks into the program and again at the end of each year.

Program for Parents:
Parent education focuses on information needs regarding medical aspects of otitis, audiological testing and meeting the individual language development needs of their child. The project offers support services geared toward effective use of community medical, social and welfare resources.

Features and Products:
The project promotes awareness within the medical community of the cause-effect relationship between recurrent otitis media and linguistic educational handicaps and uses a coordinated community approach involving the public schools, Head Start and the Medical College of Ohio.

COMMUNITY INTERACTION EARLY EDUCATION PROGRAM (CIEEP)

Address: Lorton Hall 206
600 South College
Tulsa, OK 74104

Phone: 918/592-6000
Year of Funding: 2

Fiscal Agency: University of Tulsa

Project Staff: Kaye Theimer, Director; Carol Clingan, Coordinator
three educational therapists, educational aide/secretary, parent/family consultant, audiologist, educational consultant, child development specialist, speech pathologist, developmental pediatrician, occupational therapist, social worker, psychologist

Characteristics of Target Population:
The project serves 25 children aged birth to 5 who are learning disabled, mentally retarded, severely handicapped or emotionally disturbed.

Program for Children:
CIEEP offers home-, community- and school-based individualized instruction for preschool and primary-aged handicapped children and their parents. The children make weekly visits to the CIEEP center, and the staff schedule follow-up visits to home and school. An interdisciplinary team composed of a staff developmental pediatrician, psychologist, child development specialist, social worker, audiologist, speech pathologist and occupational therapist provide additional services. The curriculum for all children is designed around a Behavioral Objective Taxonomy which proceeds developmentally from concrete to abstract and includes stimulus, content and mode of response components.

Measures of Child Progress:
The assessment process includes four phases: screening of potential CIEEP participants using a formal identification battery (FIB), which consists of Bayley Scales (birth to 3 years) and McCarthy Test of Children's Abilities (3 to 6 years) administered at 6 month intervals; diagnostic screening of selected participants in the areas of language, behavior, cognitive and motor functioning; continuous assessment of educational programming based on developmental objectives, criterion-referenced materials and daily behavioral objectives; and a final assessment using the FIB.

Program for Parents:
The project provides direct involvement for parents in the development and education of their handicapped children. Workshops for parents, educators and other professionals are held every other month. The Advisory Council includes three parents of handicapped children and helps plan the project's activities. Resource materials are available at the project site.

Features and Products:
CIEEP emphasizes strong parent and family involvement. Features offered include mother's groups, a monthly newsletter, sibling groups, family social functions and parent input into program planning. In addition, parents complete a needs assessment at the beginning of each year and an evaluation of CIEEP at the completion of the year. Available from the project are Transition to Next Placement Services, School Visit Model, CIEEP Behavioral Objective Taxonomy and Teacher Orientation Packet.

INTERVENTION AND DEVELOPMENTAL MONITORING OF HANDICAPPED AND HIGH-RISK INFANTS

Address: 901 East 18th Street
Eugene, OR 97403

Phone: 503/686-3568
Year of Funding: I

Fiscal Agency: Center on Human Development, University of Oregon

Project Staff: Diane Bricker, Director; Mary Beth Bruder, Coordinator
teacher, home interventionists

Characteristics of Target Population:
The project serves at-risk and handicapped infants aged birth to 30 months. Intervention is provided for 30 infants. In addition, the project monitors approximately 60 infants per year.

Program for Children:
Educational services to infants include physical and language therapy. At-risk infants are monitored using a developmental questionnaire. In addition, parents receive assistance in becoming effective change agents.

Measures of Child Progress:
The project uses the Bayley Scales of Infant Development, the Adaptive Performance Instrument, the Student Progress Record and the Uniform Performance Assessment System to measure child progress.

Program for Parents:
Parents of at-risk infants receive assistance in completing the developmental questionnaires. Parents of handicapped infants receive assistance in developing effective intervention techniques.

Features and Products:
The project is developing a monitoring system to track the development of at-risk infants.

INFANT DIAGNOSTIC AND TREATMENT PROGRAM

Address: 2215 N. W. Northrup, Second Floor
Portland, OR 97210

Phone: 503/229-7220
Year of Funding: 2

Fiscal Agency: Good Samaritan Hospital and Medical Center

Project Staff: David N. Grove and Sally Charuhas, Co-Directors
physical therapist, occupational therapist, social worker, pediatrician, speech/language pathologist

Characteristics of Target Population:
The project serves handicapped infants aged birth to 18 months. Handicapping conditions include developmental delays, visual or hearing impairments, motoric involvement and neurological handicaps. The infants reside in the Portland Tri-County area, southwest Washington and eastern and southern Oregon. They are referred by physicians, local agencies or parents.

Program for Children:
The program trains parents to help their handicapped infant by teaching them specific intervention strategies. For one to two hours a week, the infants and parents attend the center-based program on an individual basis. The family works with a transdisciplinary team on individually prescribed acivities. The parents follow the regimen at home and collect data on their infant's daily progress.

Measures of Child Progress:
The project administers the Bayley, Milani-Comparetti, REEL, SICD and CCD Upper Extremity/Fine Motor Test upon an infant's enrollment in the program and on a semiannual basis prior to major revisions of the IEP. Parents and staff use data collection systems to measure changes in behavior and skill acquisition.

Program for Parents:
The parents help identify their infant's strengths and weaknesses, document progress and implement the intervention programs. The project trains parents to provide appropriate intervention techniques and to determine with the staff the most feasible intervention techniques. In addition, regular day and evening programs aid the family in understanding their infant's development, intervention and data collection techniques. The families also may participate in a parent support group or a Saturday morning Dad's group, coordinated by a male staff person.

Features and Products:
The Infant Diagnosis and Treatment Program is a hospital-based educational model. Hospital and education staff members work in a transdisciplinary team to individualize programs for multihandicapped infants. The team sets medical and educational objectives for each child, and each team member is trained to work directly with the infant to meet all of those objectives. The project staff is presently preparing a program development guide for infant intervention.

SUPPORT OR STIMULATION UNIT (SOS)

Address: 101 East Sixth Street
Erie, PA 16507

Phone: 814/459-2755
Year of Funding: 2

Fiscal Agency: Erie County Crippled Children's Society, Inc.

Project Staff: Jeffrey Barninger, Director
occupational therapist, two early childhood specialists, two social workers, speech clinician, secretary

Characteristics of Target Population:
SOS serves 48 infants aged birth to one year who are handicapped or at risk for developing handicapping conditions.

Program for Children:
The project offers screening and assessment services during the first year of the child's life. The curriculum for infants is based on implementing IEP objectives to remediate developmental lags via bimonthly home visits.

Measures of Child Progress:
The project uses its own Neonatal Screening Index, a registry of at-risk factors, to screen children (aged one to two days) in the medical setting. SOS administers the Brazelton Neonatal Behavioral Assessment Scale prior to admission and Developmental Programming for Infants and Young Children and hearing screenings at 4-month intervals throughout the first year of life. The project uses monthly project-developed developmental checklists during home visits.

Program for Parents:
The hospital-based social workers initiate family support and services immediately after the infant's birth. The project offers individual and weekly support group meetings and a language program. The second phase of family support begins with a home-based program in which staff provide parents with specific strategies to implement at home. Observations of the child's developmental progress and areas of need are discussed bimonthly. Parent-infant groups meet monthly to discuss topics (chosen by the parents) related to child development. Parents also participate in program evaluation and serve on the Advisory Council.

Features and Products:
The project has developed a Neonatal Screening Index and a model for the management-by-objective methods of program evaluation. Also available are a brochure, abstract, baby book and Hotline tapes on infancy. In addition, the project will develop a total screening and assessment program for infants and videotaped training films for professionals.

INFANT/FAMILY PROJECT

Address: Child Study Program
Montgomery Hospital
15 West Wood Street
Norristown, PA 19401

Phone: 215/277-8181
Year of Funding: 3

Fiscal Agency: Montgomery Hospital and Medical Center

Project Staff: Frank W. Shaffer, Director; Barbara Evans, Coordinator
two child development specialists, nurse, teacher's aide/office manager

Characteristics of Target Population:
The project serves 130 families. Twenty-three developmentally disabled children aged birth to 3 years are enrolled in the preschool classroom. The project follows on an out-patient basis nine children at risk for a developmental disability and tracks 94 other at-risk children and their families. The project brings other children into the preschool classroom for diagnostic training; these children spend 2 to 4 weeks in diagnostic study.

Program for Children:
Components in the program for children are the neonatal behavioral assessment, selective follow-up of the newborn, out-patient services for children whose development indicates a possible developmental delay and classroom activities for children with known developmental difficulties. The project uses the Hawaii Early Learning Profile to design individual lesson plans.

Measures of Child Progress:
The project staff assess infants using the Bayley, Gesell or Stanford-Binet, while using the Brazelton for neonatal assessments in the hospital nursery. The project may also evaluate children for physical therapy, occupational therapy, speech and language therapy or medical attention.

Program for Parents:
The social worker, nurse and parents meet weekly to discuss issues related to pregnancy and birth. In the hospital nursery, a child development specialist and nurse demonstrate newborn abilities to parents. The project supports parents of newborns selected for follow-up home visits. In addition, the project offers participation in education groups to parents of children with developmentally disabling conditions.

Features and Products:
The project has developed a videotape depicting the use of the Brazelton Neonatal Behavioral Assessment Scale with the mother and father present.

A LEAST RESTRICTIVE KINDERGARTEN MODEL FOR HANDICAPPED STUDENTS

Address: Stevens Administration Center, Room B2
13th and Spring Garden Street
Philadelphia, PA 19123

Phone: 215/351-7254
Year of Funding: 1

Fiscal Agency: School District of Philadelphia

Project Staff: Ann H. Barrick, Director
special education teacher, aide

Characteristics of Target Population:
The project serves handicapped school-entry aged children (4 years 7 months as of September 1, 1980). The population includes those children for whom programming ordinarily would be in a self-contained special education class with minimum exposure to regular education and in regular kindergartens with insufficient support services. The population is representative of all disability categories recognized in P. L. 94-142

Program for Children:
The project assigns eight exceptional children to one kindergarten classroom which has a regular education kindergarten teacher, an aide and a special education teacher. The morning session has both nonhandicapped and special students. The handicapped children remain in school for a full day, spending their afternoon in self-contained classes with the special education teacher working on diagnostic and other needed special-help activities.

Measures of Child Progress:
Prior to enrollment, the project administers a battery of diagnostic tests in addition to the assessment battery routinely given to children with developmental delays prior to entry into school programs. The initial assessment determines strengths and weaknesses in the areas of socialization, communication, gross motor skills and fine motor development. These four target areas are reassessed throughout the school year in December, March and May/June. Instruments used include the Santa Clara Inventory of Developmental Tasks, the McCarthy Scales of Children's Abilities, Portage Guide to Early Education and the Learning Accomplishment Profiles.

Program for Parents:
The project conducts family workshops throughout the school year on issues such as child management, ways to use the home as a learning center and instructional materials made from ordinary objects. The project trains family members as instructional aides to the child, as well as others in the class. The project offers a family support group and counseling through supplementary services.

Features and Products:
The project is currently planning materials development.

AN EDUCATIONAL SYSTEM IN PARENTING FOR THE RETARDED WITH INFANTS AND TODDLERS (ESPIRIT)

Address: 1001 Brighton Road
Pittsburgh, PA 15233

Phone: 412/322-6008
Year of Funding: 2

Fiscal Agency: Association for Retarded Citizens (ARC) - Allegheny

Project Staff: Linda Sherman, Director
administrative assistant, social worker, research consultant, five home visitors

Characteristics of Target Population:
The program serves 25 high-risk infants aged birth to 3 years and their retarded parents. The referral must be made prenatally or on or before age 16 months. The child's parents must be economically disadvantaged and below average intellectual and adaptive functioning.

Program for Children:
The program strives to foster normal development of the child. The project staff develop an IEP which incorporates activities of the Portage Project. A home visitor models the implementation of the infant's daily program and adapts it to the parent skills. Ultimately, the parents will assume full responsibility for carrying out the program.

Measures of Child Progress:
ESPIRIT uses the Early LAP for assessment at program entry and at 6-month intervals to monitor skill acquisition; the Early LAP serves as the basis for prescriptive programming. The project administers the Bayley at program entry and at quarterly intervals to obtain program evaluation data.

Program for Parents:
The Home Training Program is based on an Individual Program Plan (IPP) for each parent. The IPP begins with an independent daily living skills checklist, a parenting skills checklist, a safety checklist and a parenting questionnaire. The project evaluates parental self-image, daily living, prenatal care, child health, safety, stimulation and behavior management skills.

Features and Products:
The project offers an innovative and replicable service system for a relatively unserved population, assessment tools specific to mentally retarded parents and the ESPIRIT Parenting Guide.

EARLY EDUCATION OPPORTUNITIES FOR PRESCHOOL HANDICAPPED CHILDREN

Address: P. O. Box 759
Hato Rey, Puerto Rico 00919

Phone: 809/764-8059
809/754-0994

Year of Funding: 2

Fiscal Agency: Puerto Rico Department of Education

Project Staff: Awilda Torres, Director; Carmen Acosta, Coordinator
two teachers, two teacher aides, social worker, two psychologists, physical therapist, occupational therapists, speech therapist, student teacher

Characteristics of Target Population:
The project serves 30 children aged 3 to 8 years in two demonstration centers. Each site serves 15 children. The San Juan center serves ten emotionally disturbed children and five children with learning disabilities. The Humacao center serves 15 children with speech, language and hearing problems.

Program for Children:
The project offers a cognitively oriented curriculum and a continuum of complete diagnostic and educational services by a multidisciplinary team in each center.

Measures of Child Progress:
A multidisciplinary team evaluates children using the Stanford-Binet, WISC, Vineland, Social Emotional Scale, Thematic Apperception Test (TAT) and others.

Program for Parents:
The project coordinators and staff orient parents to the requirements of P. L. 94-142, assess parent needs and carry out individual interviews regarding educational evaluation and placement of children. Parents participate in parent group meetings, parent training programs and the Advisory Council.

Features and Products:
The two project sites serve as models of service delivery in two different types of settings. The San Juan center is situated in an urban, low-income setting, while Humacao is a demonstration site for service to a rural population.

SEVERELY HANDICAPPED COMMUNICATION PROGRAM

Address: P. O. Box 64
Foster, RI 02825

Phone: 401/822-4622
Year of Funding: I

Fiscal Agency: Educational Technology Center, Inc.

Project Staff: Edmond S. Zuromski, Director
speech pathologist, special education teacher, program assistant

Characteristics of Target Population:
The project serves 20 severely/profoundly handicapped children aged 3 to 8 years. Ten children are institutionalized, and ten live at home.

Program for Children:
The Severely Handicapped Communication Program is based on the combined use of active stimulation programming and augmentative communication. This approach allows a multihandicapped child to control environmental events through the use of special switching or assistive devices in combination with response contingent stimulation (i.e., ideas are expressed through assistive devices).

Measures of Child Progress:
To assess child progress, the project uses the Callier-Azusa Scale, Hoskins-Squires Test for Reflex and Gross Motor Development, Bzoch-League REEL Scale, Non-Verbal Indication of Communication Exchange (NICE) and Environmental Language Inventory (McDonald).

Program for Parents:
In a home-based training program, parents of local children learn to plan and carry out activities coordinated with the classroom teacher's goals. The program for parents of children in the residential facility increases parental contact with the child and the hospital.

Features and Products:
The project has developed an Active Stimulation Programming Manual and is writing a communication manual for severely/profoundly handicapped children.

OPEN HOUSE

Address: 160 Broad Street
Providence, RI 02903

Phone: 401/274-7100
Year of Funding: 3

Fiscal Agency: Providence Mental Health Center

Project Staff: Frederica Bettinger, Director; Joanne Szamreta, Coordinator senior remedial assistant, remedial assistants

Characteristics of Target Population:
Open House serves children aged birth to 5 years who are at risk of developing emotional and/or behavioral handicaps.

Program for Children:
The project conducts home- and center-based individualized activities for parents and children together. These activities include infant stimulation groups, toddler play groups and transition groups for children entering preschool programs.

Measures of Child Progress:
Open House administers the Bayley Scales of Infant Development biannually for children aged birth to 2½ years, the McCarthy Scales annually for children aged 2½ to 5 years and the Goal Attainment Scale.

Program for Parents:
The project provides individualized home teaching activities for parents and children together, parent support groups and parent activity groups.

Features and Products:
Open House is preparing a "how-to" manual focusing on reaching out to and working with nonnurturing, potentially abusive families. The project staff have expertise in working with mothers in group settings.

HARLEYVILLE EARLY LEARNING PROGRAM (HELP)

Address: Route 1, Box 126
Harleyville, SC 29448

Phone: 803/873-5750
803/462-2273
Year of Funding: 3

Fiscal Agency: South Caroiina Department of Mental Retardation
Coastal Regional Center

Project Staff: Rosemarie B. Gregory, Director
special education teacher, early childhood teacher, two associate teachers, social worker, clerk/typist, vehicle operator, clinical counselor

Characteristics of Target Population:
The project serves mildly and moderately mentally retarded children aged 2½ to 8 years who do not have access to an appropriate program. The children reside in a rural area of the coastal region of South Carolina (Dorchester County).

Program for Children:
Two classrooms operate two full-day classes, five days per week. The integrated classroom serves nonhandicapped and handicapped children in a regular kindergarten program. The curriculum is based on High Scope's cognitively oriented curriculum, which constructs a developmentally valid educational framework for children who are functioning in the Piagetian "preoperational" period of development.

Measures of Child Progress:
When a child is referred to the program, the project uses the Pre-Denver or Denver to determine if he or she has a developmental delay. If the results are positive, the child receives a complete diagnostic evaluation using the Stanford-Binet, Vineland or Cattell. The project uses the LAP at program entry to assess children in six skill areas.

Program for Parents:
HELP provides home-based training to parents to assist them in teaching the skills recommended for their child by the education program. The project also provides inservice education on child development, mental retardation and specific child-rearing practices.

Features and Products:
This rural project is the first program in South Carolina to serve preschool handicapped children in a public school.

EARLY LIFESTYLE PROGRAM DEMONSTRATION PROJECT

Address: 412 West Ninth Street
Columbia, TN 38401

Phone: 615/388-3810
Year of Funding: 2

Fiscal Agency: The King's Daughters' School

Project Staff: Stephen W. Threet, Director; Pam Frakes, Coordinator
development director, project secretary, school nurse, speech therapist, two classroom teachers, two aides, home trainer, two van drivers, two attendants

Characteristics of Target Population:
The project serves moderately to severely retarded children from a six-county area in rural southcentral Tennessee. The project serves sixteen children aged 4 to 8 years in two preschool classrooms at the King's Daughters' School. An additional twelve children aged birth to 4 years participate in a home-based infant education program.

Program for Children:
The Early Lifestyle Program replicates the Preschool Classroom and the Home-based Infant Model of the Norfolk Early Education for Handicapped Children Project (NEEHCP). The classroom curriculum is Norfolk's "Individuals in Groups" which provides for the integration of one-to-one training and normative small-group instructional activities with theme/topics or units of study. The curriculum design of the Home-based Infant Model allows for the integration and use of various existing curriculum materials.

Measures of Child Progress:
The project uses the NEEHCP Evaluation System to measure child gains. This is a nondiscriminatory, continuous monitoring system based on learning as opposed to performance. The project administers criterion-referenced measures pre and post for individual program development; these include Norfolk Assessment for "Individuals in Groups" for the Preschool Classroom and the Early LAP and REEL for the Infant Model. For additional documentation of child gains, the project administers pre and post the McCarthy Scales of Children's Abilities for the Preschool Classroom and the Bayley Infant Scales for the Infant Model.

Program for Parents:
At least 25% of the Advisory Council is composed of parents. The project schedules group parent activities regularly. Parents receive training for implementing home teaching programs through classroom participation or weekly home visits. Parents also participate in their child's assessment and IEP development and implementation.

Features and Products:
The replication of a proven adoptable model has eliminated the expense and time of initial program development for services to children. This has enabled the Early Lifestyle Project to address other issues of rural service delivery and to focus on dissemination and coordination strategies.

TECHNICAL EDUCATIONAL CENTER FOR CHILDREN WITH HANDICAPS (PROJECT TEACH)

Address: 4259 Forest View Drive
Memphis, TN 38118

Phone: 901/795-3930
901/454-5286

Year of Funding: 3

Fiscal Agency: Memphis City Schools

Project Staff: Harold Perry, Director; Jeryl McCormick, Coordinator
occupational therapist, speech pathologist, parent trainer, research specialist, curriculum coordinator, therapy aide, typist

Characteristics of Target Population:
The project serves ten severely physically handicapped children who are nonverbal and dependent in activities of daily living.

Program for Children:
The project provides a system of assistive devices designed to enhance the educational opportunities for severely physically handicapped children. Each child attends the class most appropriate for his or her academic and developmental level and follows the curriculum specified on the IEP. The Rehabilitation Engineering Center designs communication and Aids to Daily Living (ADL) equipment to facilitate the educational progress of the children.

Measures of Child Progress:
Project TEACH administers the Technical Aid Evaluation to determine needed communication and ADL equipment. The project determines academic achievement through periodic analysis of standardized tests and informal teacher/parent assessment data.

Program for Parents:
The parent program includes home and school visits, group meetings and a newsletter to help parents use, maintain and incorporate technical aids in the total management program of their child.

Features and Products:
The project-developed Technical Aid Evaluation instrument collects the information necessary to prescribe aids in the areas of seating/mobility, communication, feeding and toileting.

FAMILY, INFANT AND TODDLER PROJECT (FIT)

Address: Box 151
Peabody College
Nashville, TN 37203

Phone: 615/327-8121
615/327-8094
Year of Funding: 3

Fiscal Agency: George Peabody College of Vanderbilt University

Project Staff: Harris Gabel, Director; Judith A. Davis, Coordinator
three infant/family trainers, training coordinator, program evaluator, secretary

Characteristics of Target Population:
The project serves 20 mentally retarded and multihandicapped children aged birth to 4 years residing in rural areas of middle Tennessee.

Program for Children:
FIT provides a parent-implemented educational program in weekly clinics in rural communities. The project develops an individualized program of activities in the areas of gross motor, personal/social, hearing and speech, nonverbal communication, eye-hand coordination and gestural and verbal imitation.

Measures of Child Progress:
FIT administers the Uzgiris-Hunt Ordinal Scales of Infant Development and the Griffiths Mental Developmental Scales at 6-month intervals; the Bayley Scale of Infant Development is administered annually.

Program for Parents:
Parents participate in individual training sessions focused on implementing their child's educational programs. Parent groups provide information on child development and rearing and allow for a peer support system. A program for extended family members gives increased support to parents and children.

Features and Products:
FIT is based on the strategy of mobilizing, strengthening and coordinating existing service agencies to enhance the development of young mentally retarded children. In addition to the child and parent programs, the project developed an inservice training program to help local allied professionals in rural communities improve their services to the target population. The project staff have expertise in developing early intervention programs in rural areas.

CHILD SUCCESS THROUGH PARENT TRAINING

Address: Child Success Project
P.O. Box 22487 - TWU Station
Denton, TX 76204

Phone: 817/387-6063
Year of Funding: I

Fiscal Agency: Texas Woman's University

Project Staff: Sue Schafer, Director; Linda Ryan, Coordinator
program associate, graduate research assistant, student assistant

Characteristics of Target Population:
The project serves children aged birth to 36 months who have identified multihandicapping conditions or are at risk of developing one or more conditions. Parents must be willing to participate in their child's program. The project serves a maximum of 40 children from three counties in rural north Texas at any one time.

Program for Children:
The project uses the Developmental Programming for Infants and Young Children (DPIYC) for assessment and development of behavioral objectives in the areas of gross and fine motor, perceptual, self-care, social, cognitive and language. During center and home visits, parents receive instruction and assistance in implementing their child's developmental activities.

Measures of Child Progress:
Children receive DPIYC assessments upon program entrance and at 6-month intervals. The project staff review child progress toward individualized objectives at 3-month intervals. The project also uses case studies and CIPP evaluation.

Program for Parents:
Parents actively participate in all aspects of services to their child. Through lecture, discussion, demonstration, supervised practice and videotape feedback, parents develop the skills needed for advocacy, understanding handicapping conditions and provision of comprehensive training for their child. In addition, the project conducts parent needs assessment, case studies and pre and posttest evaluation.

Features and Products:
The project features parents as active members of a transdisciplinary team of allied health professionals and serves children with all types of handicaps. The project will identify specific parent teaching strategies which can be used regardless of the type of handicap the child presents.

TEACHING CONCEPTS FOR AUTISTIC CHILDREN

Address: 1300 West Lancaster
Fort Worth, TX 76102

Phone: 817/336-8611
Year of Funding: 3

Fiscal Agency: Child Study Center

Project Staff: Reba Walker, Director; Madalyn Teal, Coordinator

Characteristics of Target Population:
The project serves 16 autistic children aged birth to 8 years.

Program for Children:
The project assists local school districts in diagnosing and planning for autistic children.

Measures of Child Progress:
The staff administers the ASIEP and CARS at the beginning and end of the school year and reviews child progress on the Curriculum - Skills Assessment for Autistic Children every 90 days.

Program for Parents:
Individual and group counseling is available through the Child Study Center.

Features and Products:
Materials developed for this project include the Training Manual for Teachers of Autistic Children and the Curriculum - Skills Assessment for Autistic Children (C-SAAC).

PROJECT TRANSITION

Address: MHMRA
2501 Dunston
Houston, TX 77005

Phone: 713/526-2871
Year of Funding: 3

Fiscal Agency: Mental Health Mental Retardation Authority
Harris County

Project Staff: Marlene K. Hollier, Director; Mary J. McGonigel, Coordinator dissemination strategist, three transition teachers, secretary

Characteristics of Target Population:
The project provides transitional support services to 35 children enrolled in early childhood classes in 3 local public school districts. The children are 3 to 5 years in age, and handicapping conditions range from mild to severe levels of mental retardation and developmental delay.

Program for Children:
The project assists young children leaving infant programs for ECH classes in the public schools. The staff assist public school personnel in determining appropriate placement and IEP development. After the children are enrolled in ECH classes, the staff meet biweekly with the ECH teachers to provide curricular support and to monitor child progress. A transitional curriculum has been developed to provide ECH teachers with materials similar in format to that in the MHMRA Infant Programs. These materials are developmentally based and sequentially ordered. The curriculum step-sheets allow systematic data collection.

Measures of Child Progress:
The transition staff monitor child progress on the transitional curriculum only. Data are collected by the ECH teachers during each lesson in which the curriculum is used. The transition staff meet biweekly with the ECH teachers to discuss child progress based on this data and possible revision of the curriculum. Participating public school districts are responsible for the administration of formal standardized instruments to measure child progress.

Program for Parents:
Services to parents are primarily information in nature. Prior to the children's entry into ECH classes, a series of 5 parent meetings is held in which such topics as parental rights and responsibilities, IEP development, P. L. 94-142, parent-teacher communication and parent support organizations are discussed. A project staff member attends the child's initial staffing meeting with the parent(s). After the children are enrolled in ECH classes, the project staff inform parents of local activities and programs of interest. The goal is to enable parents to become effective communicators with their children's ECH teachers rather than to rely on project staff for liaison assistance.

Features and Products:
- The Project Transition Parent Notebook
- A brochure describing Project Transition
- The Project Transition developmentally sequenced curriculum will be available in Spring 1981

A PEPPY KIDS PROJECT

Address: 503 Castroville Road
San Antonio, TX 78237

Phone: 512/434-7033
Year of Funding: 2

Fiscal Agency: Young Women's Christian Association

Project Staff: Delia Pompa, Director
program specialist, social worker, secretary, teacher, teacher aides, recreation aides

Characteristics of Target Population:
The project serves 30 children aged 3 to 8 years with mixed or noncategorical handicaps.

Program for Children:
The project offers day care, after school care, adaptive aquatics, and a recreational program which includes gymnastics, ballet and folk dancing.

Measures of Child Progress:
The project staff review records of assessment used by schools, including Uzgiris-Hunt, Brigance and the Developmental Sequence Performance Inventory. The staff then diagnose children using a battery of developmental assessments. Progress is monitored throughout the year using center-developed checklists.

Program for Parents:
Parents participate as members of the advisory committee and take part in special interest workshops. The project also provides for parents a respite care referral system.

Features and Products:
The staff is trained to work with bilingual children. The project will develop a curriculum guide for mainstreaming handicapped children into a recreational and daycare setting. It will be distributed to 405 YWCAs across the country.

PROJECT SEARCH

Address: 415 West Avenue N
Silsbee, TX 77656

Phone: 713/385-5286
Year of Funding: 2

Fiscal Agency: Silsbee Independent School District

Project Staff: Jimmye Gowling, Director
registered nurse, speech and language therapist, two teachers, secretary

Characteristics of Target Population:
The project serves 17 preschool children aged birth to 5 years who exhibit physical and/or mental disabilities or specific developmental delays.

Program for Children:
The program for the children is child-centered. The individualized therapy and instructional programs emphasize the areas of language, motor, personal-social and problem solving skills. In addition, the project makes referrals to physical therapy, otological, neurological, orthopedic, psychological, medical and other related services.

Measures of Child Progress:
The project staff initially administer the Denver Developmental Screening Test to determine each child's abilities. Within 45 days, eligibility is determined using the Bangs Birth-to-Three Scales and the Caldwell Cooperative Preschool Inventory. Quarterly progress is measured by teacher-made tests and/or Portage Behavior Checklist. Reevaluation occurs annually to determine progress of the child and appropriateness of the program.

Program for Parents:
Parent involvement includes active participation in the instructional activities, home activities, special topical workshops, parent meetings and the Parent Advisory Council.

Features and Products:
The project conducts all direct service activities for children and parents in a special mobile classroom which travels to the child's home or neighborhood. All equipment and supplies needed for these activities are maintained on the mobile unit. The project provides inservice training to the staff, which includes an orientation to the project's philosophy, films and filmstrips concerned with diagnosis of handicapping conditions and techniques for remediation of disabilities, site visits to medical or other facilities serving young handicapped, workshops dealing with parents and infants, participation in local, state and national professional groups and conferences, weekly staff meetings and access to the project professional library. The staff use role playing activities to reinforce interpersonal skills.

UTAH PROGRAM FOR AUTISTIC CHILDREN

Address: 668 South 1300 East
Salt Lake City, UT 84102

Phone: 801/581-0103
Year of Funding: 2

Fiscal Agency: Utah State Department of Social Services

Project Staff: Paige S. Hinerman, Director/Coordinator
teaching couple

Characteristics of Target Population:
The project serves five autistic children aged 3 to 8 years in a teaching home and nine autistic children aged 5 to 9 in public school classrooms.

Program for Children:
The model has three major components: 1) a teaching home where five children reside during the week and receive individualized, one-to-one instruction in the areas of language, self-help, social skills and eliminating problem behaviors. 2) A day school program which involves placement in a special school or integration into the local school system. The children attend school five days per week and receive instruction in the above areas and academic skills. 3) A family involvement component through which the staff identify needs of the child's family, provide basic information regarding their child's handicapping condition and teach behavioral techniques and principles appropriate to managing their child at home. All three components of UPAC are coordinated so that each child's day is devoted entirely to accomplishing tasks ultimately aimed at becoming a functional member of society.

Measures of Child Progress:
The staff measure each child's daily progress through discreet trial monitoring of language, self-help and social skills, and reduction of inappropriate behavior. On entry, exit and at 6-month intervals between, the staff administer additional tests on the following instruments: Individual Assessment and Curriculum System, Bayley or Stanford-Binet, Vineland Social Maturity Scale, TARC, AAMD Adapted Behavior Scale, and Peabody Picture Vocabulary Test.

Program for Parents:
The staff conduct parental needs assessments and offer parent/staff conferences, counseling groups and a newsletter to meet these needs. Parents also train other parents and participate in classroom observation, advocacy groups and an Advisory Board. The project provides training for parents of other severely multiply handicapped children in the local school district.

Features and Products:
UPAC has a residential program for five autistic children which is coordinated with a classroom in the local school district. Children in this program attend the local school district class five hours daily, then return to the residential teaching home where instruction continues until the end of the day. On weekends and holidays, residential program children receive instruction from their parents at home. The staff train parents to use the same instructional program used at the center. In addition, the project is developing a parent-training and staff-development program and a comprehensive manual on how to set up a teaching home. A unique support feature is that state social services and the public educational service collaborate to provide 24-hour educational services to the children enrolled in the program.

MODEL CHILD DEVELOPMENT PROJECT FOR SEVERELY HANDICAPPED CHILDREN AGES BIRTH TO FIVE YEARS

Address: Box 222
Rutland, VT 05701

Phone: 802/775-2381
Year of Funding: 3

Fiscal Agency: Rutland Mental Health Service, Inc.

Project Staff: David R. Ritter, Director
parent specialist (social worker), lead teacher, support teacher, two child development specialists, psychologist

Characteristics of Target Population:
Pilot Parents serves ten families of handicapped infants; Infant Stimulation serves twelve infants and toddlers; Therapeutic Preschool serves six children. All children present severe developmental handicaps, serious behavior disorders or emotional disturbances. All are aged birth to 5 years.

Program for Children:
Home-based Infant Stimulation uses a parent training approach to help parents interact and work with their handicapped infants. Therapeutic Preschool uses a modified developmental therapy curriculum with major focus on the child's social/emotional growth.

Measures of Child Progress:
To assess instructional and overall evaluative progress, the project uses the Bayley Scales with Kent Profile, Callier-Azusa, Kohn Behavioral Scale, California Behavioral Scale and the McCarthy Scales. The project uses videotape to assess child-parent interaction.

Program for Parents:
Pilot Parents trains a cadre of ten parents of handicapped children to provide support, information and advocacy for parents of newborn handicapped infants. Parent involvement is also a crucial aspect of Infant Stimulation and Therapeutic Preschool Programs.

Features and Products:
Brochures describing the project are available.

HAMPTON INSTITUTE MAINSTREAMING MODEL (HIMM)

Address: Special Education Program
Hampton Institute
Hampton, VA 23668

Phone: 804/727-5434
Year of Funding: I

Fiscal Agency: Hampton Institute

Project Staff: James B. Victor, Director; Shirley Vulpe, Coordinator intake/mainstreaming teacher, mainstreaming teacher, two teacher aides

Characteristics of Target Population:
The project serves children with significant developmental delays in motor, social, language and cognitive behavior. The project integrates nonhandicapped children from urban and rural locales with 20 to 40 handicapped children aged 2 to 5 years. Services to unserved minority and low-income children are emphasized.

Program for Children:
HIMM adheres to the developmental interactional approach to learning. The purpose of the Hampton Model is to bring about a greater degree of social competence in children and to enhance school success through the acquisition of developmentally appropriate skills. The integration of handicapped and nonhandicapped children is critical to the model. The curriculum is based on the Vulpe Assessment Battery which provides developmental performance analysis and individualized programming for the typical and atypical child. The program features an Intake Room and offers services ranging from intake and mainstreaming assessment to full integration into the Early Childhood Center with nonhandicapped children.

Measures of Child Progress:
For screening purposes, the project uses the DDST, PPVT, Goldman-Fristoe Test of Articulation, the Preschool Language Scale and Pureton Audiometric Testing. The project uses both criterion-referenced and normative assessment instruments with the Vulpe Assessment Battery for developmental performance analysis and individualized programming and the McCarthy for normative evaluation.

Program for Parents:
Parents may assist in the classroom and participate in guided observations of classroom activity (through one-way mirrors), individual and small group training sessions and informal group meetings. The project offers counseling and referral services and a parent lending library.

Features and Products:
HIMM features an Intake Room for systematized classroom integration and a nonmainstreamed control group. The project provides an inservice training program for regular teachers (orientation, weekly training sessions, site visits and tuition rebates) and a preservice master's level intern training program. Project staff have expertise in working with minority children and families.

RICHMOND EARLY CHILDHOOD EDUCATION PROJECT (RECEP)

Address: Oliver Hall, Room 2096
Virginia Commonwealth University
Richmond, VA 23284

Phone: 804/257-1305
Year of Funding: 2

Fiscal Agency: Virginia Commonwealth University

Project Staff: John Filler, Director; Connie Kasari, Coordinator
four teachers, three aides, occupational therapist, project evaluator

Characteristics of Target Population:
RECEP serves 30 severely/profoundly handicapped children aged birth to 6 years.

Program for Children:
Children aged 2 to 6 years attend Richmond Public School classes for the severely/profoundly handicapped and receive home visits twice per month from teachers and specialty personnel. Infants attend a school-based program two days per week and receive two home visits per month. The project emphasizes parents as teachers of their children.

Measures of Child Progress:
The public school evaluation team annually evaluates project children with standardized measures such as the Stanford-Binet and Cattell. Project staff evaluate infants using the Uzgiris-Hunt or Bayley. MOS provides a comprehensive educational assessment and serves as a criterion-referenced tool for summative evaluation.

Program for Parents:
Parents participate in the planning, implementation and evaluation of their child's IEP and specify their role in the educational process through their corresponding Parent Involvement Plan. RECEP trains parents to work with their child at home with emphasis on solving problems encountered at home.

Features and Products:
This transdisciplinary project emphasizes the advisory role of the therapist and other ancillary personnel and focuses on service to innercity minority families. The project is a joint endeavor of Virginia Commonwealth University and Richmond Public Schools.

PROVIDENCE PROJECT

Address: P. O. Box 1067
Everett, WA 98206

Phone: 206/258-7312
Year of Funding: 2

Fiscal Agency: Providence Hospital

Project Staff: Shirley Joan Lemmen, Director
clinical nurse specialist, early childhood specialist, instructional assistant

Characteristics of Target Population:
The project serves developmentally delayed or at-risk children aged birth to 35 months. Parental participation is a criterion for acceptance into the program.

Program for Children:
The project provides a comprehensive educational program for at-risk infants in a home- and center-based setting. The children and their parents attend weekly one-hour group sessions, and the staff provide individual therapy and training as needed. An interdisciplinary team structures a transdisciplinary, individually prescribed intervention program to facilitate the cognitive, language, motor and social-emotional development of the children. The project provides case management for each child and family. Project staff and support personnel function as consultants in addition to providing direct services to families.

Measures of Child Progress:
The project staff use the Bayley Scales of Infant Development, the Infant Motor Assessment, the HELP Activity Guide and parental observation to assess child progress.

Program for Parents
The project emphasizes the role of parents as primary caregivers and conducts parental needs assessments to set up learning goals. Educational services include parent/staff conferences, support groups and training workshops. Parents also participate in classroom observation and teaching, fund-raising activities and on an Advisory Board.

Features and Products:
Providence Project is a collaboration of Providence Hospital, the Everett School District and various professionals and community agencies to provide both a comprehensive infant/perinatal at-risk screening model and appropriate medical, educational and psychological evaluations of at-risk infants. An early identification program is a major feature of the program. The project also seeks to develop innovative teaching techniques and adaptive technology to meet required special needs and to provide training to students and interested professionals relating to selected components of the project. The interdisciplinary approach ensures the most appropriate and cost-effective service to the children and families served.

NORTHWEST CENTER INFANT/TODDLER DEVELOPMENT PROGRAM

Address: 1600 West Armory Way
Seattle, WA 98119

Phone: 206/285-9140
Year of Funding: 1

Fiscal Agency: Northwest Center for Retarded

Project Staff: James McClure, Executive Director; Linda L. Gil, Project Director

Characteristics of Target Population:
The program serves 24 handicapped children and 24 normally developing children from birth to 36 months. The handicapped population includes developmentally delayed children with mild to severe handicapping conditions.

Program for Children:
The project is both home-based and center-based. The in-center, full day program features developmentally integrated groupings of handicapped and normally developing children, eight children in each group. To provide balanced programming, the children participate in activities with their age-appropriate peer group. Activities are offered within a cognitively oriented framework with direction toward specific skill development. Other program features include individualized development plans for both normally developing and handicapped children and opportunities to balance normal and atypical growth and development. Experienced special education teachers share in team teaching with early childhood teachers; therapists work within the classroom.

Measures of Child Progress:
The project staff initially evaluate children using the Bayley scales and at least two other assessment tools from the following: Koontz Child Development Program, Portage Guide, Memphis Project, Preschool Profile, or WABASH. The staff use the Washington Social Code Assessment Tool, Uzgiris-Hunt, Test for Gross Motor and Reflex Development, Sequenced Inventory of Communication Development, and other selected tools to measure ongoing development.

Program for Parents:
The home specialist makes initial contact in the home and assesses parent and child needs. From an evaluation of the individual needs of parent and child, the staff determine whether the center-based, home-based or a combination of both is most appropriate. Parents are involved in monthly evening parent meetings, classroom activities and parenting skills development sessions. A full-time home specialist provides services in the home-bound program and a half-time home specialist focuses on in-center parents' needs and programs.

Features and Products:
Each staff member has a staff development plan which the project director monitors. Quarterly inservice is directed toward topics of special interest. Handicapped adults receive training in a Child Care Aide Training Curriculum to work as classroom aides, assisting teaching teams. In conjunction with other agencies, the project offers single-parent counseling groups at the center. Cooperative contracts with major colleges and universities provide a practicum site for teacher, nursing and nutrition interns and volunteers. The project also offers a parent lending bank for clothes, equipment and educational items.

THE MODEL PRESCHOOL PROJECT

Address: West 1025 Indiana
Spokane, WA 99205

Phone: 509/456-7086
Year of Funding: 3

Fiscal Agency: Educational Service District 101

Project Staff: Candy Baker, Director/Coordinator
psychologist, teachers, physical therapist, occupational therapist, speech therapist, aides, training coordinator

Characteristics of Target Population:
The project serves 60 handicapped preschool children aged birth to 5 years. A variety of handicapping conditions are present which may include neurological impairments, gross motor handicaps, moderate to severe mental retardation, speech/language impairments and Down's syndrome.

Program for Children:
The educational program replicates the University of Washington's Model Preschool Center for Handicapped Children. Children receive instruction in the areas of cognitive/pre-academic skills, gross and fine motor skills, general language skills, and social/self-help skills. They also receive support services as needed. In addition to the daily, 4-hour classroom program, the project conducts an infant learning program for parents and infants during a weekly 30- to 60-minute session.

Measures of Child Progress:
The project uses three developmental instruments as pre and posttests: the Developmentally Sequenced Performance Inventory at two sites, the Panhandle Developmental Scale at another, and the Learning Accomplishment Profile at the fourth site. The primary purpose of the instruments is to assess systematically each child's skill at the time of program entry and throughout the year.

Program for Parents:
The staff encourage parents to participate in all aspects of their child's program. Parents play an important part in setting appropriate and useful goals for the children. In addition, parents are trained to supplement the implementation of the IEP by conducting home programs and to work in the classroom as aides. Parents serve as members of the advisory council, are encouraged to attend inservice presentations and are kept abreast of current happenings within their child's program site via a newsletter distributed approximately every other month.

Features and Products:
Currently the program operates in three unique settings: public schools, a day care center and a private school.

CHILDREN WITH HANDICAPS IN ACCOUNTABLE RURAL TEACHING (CHART)

Address: 311 Ogiebay Hall
West Virginia University
Morgantown, WV 26506

Phone: 304/293-3303
Year of Funding: 2

Fiscal Agency: West Virginia University

Project Staff: John D. Cone, Director; Marilyn R. Frank, Coordinator
teacher, classroom assistant

Characteristics of Target Population:
The project serves six to eight moderately to profoundly multihandicapped children aged 3 to 6 years from rural Preston County.

Program for Children:
This combined center- and home-based program indigenous to the public school system completes a gap in the continuum of services from birth to adulthood. The program is fully integrated with existing early childhood education classes. The curriculum, the West Virginia System, is a diagnostic-prescriptive, behavioral program containing 5,200 precisely worded objectives and an equal number of direct instructional teaching plans.

Measures of Child Progress:
To determine program eligibility, community mental health center and/or school district personnel administer formal, norm-referenced instruments. CHART conducts summative educational evaluations prior to program entry and at 6-month intervals thereafter using the criterion-referenced West Virginia Assessment and Tracking System, which is correlated with the curriculum and cross-referenced to numerous other measures (e.g., LAP, EMI, Brigance, Camelot, Behavioral Checklist Profile). The project completes formative assessment daily using the autographing Universal Data Sheet.

Program for Parents:
A three-level parent/family involvement program includes group meetings, participation in home enrichment and classroom volunteer programs and formal parent training in using the model curriculum at home.

Features and Products:
The project has developed the West Virginia System, a diagnostic-prescriptive behavioral curriculum, and the West Virginia Assessment and Tracking System, a criterion-referenced assessment instrument correlated with the curriculum.

PROJECT FIRST CHANCE INTERACTIVE OUTREACH PROGRAM

Address: Department of Special Ed.
College of Ed., Bldg. 69
University of Arizona
Tuscon, AZ 85721

Phone: 602/626-3248
Years of Outreach Funding: 2

Fiscal Agency: University of Arizona

Project Staff: Jeanne McRae McCarthy, Director; Sharon Wilson, Assistant Director; Susan Chiccehitto, Coordinator; coordinator of personnel development, secretary

Source of Continuation Funding for Service Delivery Program:
P. L. 94-142 funds to Local Education Agency.

Description of Demonstration Model:
Project First Chance is a center-based program serving mildly, moderately and severely handicapped children across all categories of handicapping conditions except hearing impaired. The project combines an applied behavior analysis approach to instruction and classroom management with a cognitive approach to communication and preacademics and a strong developmental approach to children's learning. The model emphasizes individual programming, using a systematic data monitoring system, and was developed in a self-contained setting. The major components are used effective in a home-based program or in an integrated setting.

Major Outreach Goals:
- To stimulate the development of systematic educational services to preschool handicapped children and their families.
- To implement the Project First Chance Interactive Outreach Model.

Major Outreach Services:
The project conducts public awareness conferences and assists in planning and implementing programs. Outreach staff conducts training at the demonstration site and provides technical assistance in the form of follow-up visits and print/VTR products to fully replicate the model components

Features and Products:
Products available include a 400-page Curriculum, Assessment for Instructional Purposes, and Systematic Data Monitoring. The Bloom and Lahey-based language component is available in field-test format. Materials developed reflect the Hispanic, Indian and Anglo traditions of the families.

Twenty-one sites are known to be using components of the demonstration model.

EARLY CHILDHOOD EDUCATION REVERSE MAINSTREAM PROJECT

Address: 1925 S. Budlong Avenue
Los Angeles, CA 90007

Phone: 213/731-7664
Years of Outreach Funding: 7

Fiscal Agency: Los Angeles Unified School District (LAUSD)

Project Staff: Robert Williams, Director; Addie Moore and Whit Hayslip, Coordinators; rotating substitute teacher, child development specialist, project development consultant and project evaluator (latter three part-time)

Source of Continuation Funding for Service Delivery Program:
Los Angeles Unified School District

Description of Demonstration Model:
The project is a public school early education program integrating physically handicapped and nonhandicapped 3- to 8-year-olds. Teaching teams use the Dual Educational Approach to Learning (DEAL), which includes an open structured classroom environment in the Option period and teacher-selected instructional plans in the Formal time.

Major Outreach Goals:
- To demonstrate and train in an appropriate learning environment an educational approach to young children (DEAL).
- To demonstrate the benefits of handicapped and nonhandicapped children being schooled together and to give training in support of this concept.
- To provide staff development, awareness training and consultant services to LAUSD, Head Start and the community.

Major Outreach Services:
The project offers comprehensive 3-day training programs using the model site for observation and participation. The project staff provides orientations and tours at the model site. The project offers workshop presentations to LAUSD schools and Head Starts; consultant services are provided to LAUSD schools and, on a limited basis, to Head Starts.

Features and Products:
- Feeling Good Comes First: A film about the integration of handicapped and nonhandicapped children
- That's Me: A film about physically handicapped children in the DEAL program
- A filmstrip and cassette introduction to DEAL
- A guidebook for the DEAL program
- A looseleaf training packet used in the 3-day training program
- A program brochure

Eight sites are known to be using components of the demonstration model.

PARENT INFANT OUTREACH PROJECT

Address: 3200 Telegraph Avenue
Oakland, CA 94609

Phone: 415/655-9521
Years of Outreach Funding: 1

Fiscal Agency: Children's Hospital Medical Center

Project Staff: Nancy Sweet, Director
outreach educator, outreach assistant

Source of Continuation Funding for Service Delivery Program:
Regional Center of the East Bay (developmental disabilities funds)

Description of Demonstration Model:
The project offers an infant program with a strong emphasis on education and support for parents and involvement of the whole family. It takes a developmental approach for the parent (based on the Parent Behavior Progression Scale) and for the child (Bayley). A multidisciplinary professional staff serve both in the home and at the center.

Major Outreach Goals:
- To provide training and program development assistance to a broad spectrum of medical, educational and social service agencies.
- To stimulate effective early intervention through improved family involvement.
- To coordinate services at the local and state level.

Major Outreach Services:
The project uses a three level training program: multiagency, agency-specific and individual. Project staff provide assistance with replication of the family-oriented model.

Features and Products:
The project has documented parent progress on four scales, as well as the interrelationship of infant/parent performance and the medical/educational/support collaboration. The project has developed and made available Family Adaptation Profile and an Infant Behavior Profile.

Two sites are known to be using components of the demonstration model.

EARLY ON: OUTREACH II

Address: San Diego State University
San Diego, CA 92182

Phone: 714/265-6974
Year of Outreach Funding: 4

Fiscal Agency: San Diego State University

Project Staff: Richard C. Brady, Director
two program specialists

Source of Continuation Funding for Service Delivery Program:
Local education agencies.

Description of Demonstration Model:
The project uses an applied behavioral analysis approach to the diagnosis, prescription, instruction and evaluation of handicapped children in preschool settings. The Early-On model is a home- and school-based program.

Major Outreach Goals:
- To provide inservice training in Early-On management techniques for those serving severely/multiply handicapped preschoolers.
- To upgrade and maintain demonstration sites using Early-On procedures in public schools.

Major Outreach Services:
The project provides on-site, inservice training of early childhood educators working with handicapped children.

Features and Products:
Early-On: Outreach II has developed training modules and accompanying materials which facilitate on-site training. Each presentation is tailored to the needs of the site as assessed by the staff and site personnel.

Three sites are known to be using model components

PROJECT MORE
(MAINSTREAMED OUTREACH AND RESOURCES FOR EDUCATION)

Address: Developmental Services Dept.
3045 Santiago Street
San Francisco, CA 94116

Phone: 415/661-7274
Year of Outreach Funding: 1

Fiscal Agency: Family Service Agency of San Francisco

Project Staff: Amy Tan, Director
principal investigator, training director, two special education training specialists, information and outreach specialist, secretary

Source of Continuation Funding for Service Delivery Program:
San Francisco Unified School District (LEA), Golden Gate Regional Center (State Department of Social Services), State Office of Child Development and private foundations.

Description of Demonstration Model:
The educational daycare/childcare model is based on components of mainstreaming of handicapped children aged birth to 5, center teaching, assessments using the Bayley, Memphis and Hawaii, IEP planning every 6 months, parent participation and specialist consultant services such as physical, occupational, and speech and language therapy.

Major Outreach Goals:
- To increase the availability of high-quality educational programs for young handicapped children, particularly those from low-income black, Hispanic and Asian communities.
- To provide training and technical assistance to personnel of the San Francisco and Oakland Unified School Districts.
- To create 5 mainstreamed replication sites within the LEAs. These will in turn provide for replication within the network of 21 + Children's Centers in each school district.

Major Outreach Services:
Project MORE offers a 13-week training program for teachers, aides, supervisors and resource teachers in the Children's Centers. The project staff provides child find and referral of 20 handicapped children into the replication sites that are being mainstreamed. The project schedules awareness activities that include three conferences/workshops, dissemination of written and published materials, and participation in community activities relating to ethnic communities. To programs wishing to implement the mainstreamed daycare model, Project MORE provides technical assistance and consultation. In addition, the project coordinates with state involvement on the need for mainstreamed programs in alternate settings, such as childcare, and in developing training guidelines for personnel working with children with special needs.

Features and Products:
The project staff and target sites are representative of Asian, black and Hispanic communities. Training program participants receive 3 semester credits from University of California at Berkeley. A set of 12 training manuals will be available June 1981.

Five sites are known to be using components of the demonstration model.

INREAL/OUTREACH

Address: Dept. of Communication Disorders
and Speech Sciences
Campus Box 409
Boulder, CO 80309

Phone: 303/492-8727
Year of Outreach Funding: 4

Fiscal Agency: University of Colorado

Project Staff: Rita S. Weiss, Director
Karen Hansen, Coordinator-Trainer; Elizabeth Heublein, Coordinator-Trainer

Source of Continuation Funding for Service Delivery Program:
University of Colorado and local contributions from participating school districts.

Description of Demonstration Model:
INREAL (INclass REActive Language) was an HCEEP funded demonstration project through 1974-77. The major goal of the project was to improve the language and related learning skills of 3- to 5-year-olds, including bilingual (Spanish) children, by the INREAL method of intervention in a naturalistic, non-stigmatizing model.

Major Outreach Goals:
- To replicate and adapt the INREAL model.
- To certify INREAL Specialists and Trainers.

Major Outreach Services:
The project provides preservice, inservice and INREAL Certification training. In addition, the project assures quality control of replicated/adapted projects.

Features and Products:
Products developed include training videotapes and the INREAL Training Evaluation Model (ITEM). Demonstration data show that INREAL intervention significantly affects language improvement in the experimental group. Longitudinal data show that use of INREAL method at preschool and kindergarten levels result in a highly significantly reduced need for later remedial services.

Fifty sites are known to be using components of the demonstration model.

PROJECT UPSTART

Address: 2800 13th Street, N.W.
Washington, DC 20009

Phone: 202/232-2342
Year of Outreach Funding: 1

Fiscal Agency: Washington, D.C. Society for Crippled Children

Project Staff: D. Lee Walshe, Director; Larry Szuch, Coordinator
occupational therapist, educational specialist, speech therapist

Source of Continuation Funding for Service Delivery Program:
Washington, D.C. Society for Crippled Children.

Description of Demonstration Model:
Based on the rationale that improvement of neuro-sensorimotor function will contribute to educational progress, Project UPSTART weaves techniques of neuro-developmental therapy and sensory integration into the educational program. Two classrooms operate four days per week for two 2½-hour intervention periods and provide training in all curriculum areas. The project developed a plan for sequencing activities along a neuro-sensorimotor sequence and uses the program to develop individualized plans for each child. The gross and fine motor program is totally integrated into the classroom structure and consists of individual handling, positioning, preambulation and control of the sensory environment through therapeutic intervention. The project measures child progress with the GMRD, REEL, Cattell, Vineland and Early LAP.

Major Outreach Goals:
- To expand services to rural, southern Maryland and southeast Washington, D.C., using the project's intervention model.

Major Outreach Services:
The project provides consultation to a new infant education program for St. Mary's County and southeast Washington, D.C.

Features and Products:
Project UPSTART developed the Parent Help Wanted and Help Received questionnaires. The Sequence Neuro-Sensorimotor Program, a method of service delivery which prepares the handicapped child for learning, will be available in July 1981.

Two sites are known to be using components of the demonstration model.

RUTLAND CENTER DEVELOPMENTAL THERAPY MODEL OUTREACH PROJECT

Address: 125 Minor Street
Athens, GA 30606

Phone: 404/542-6076
Year of Outreach Funding: 7

Fiscal Agency: University of Georgia

Project Staff: Karen R. Davis, Director
training associates

Source of Continuation Funding for Service Delivery Program:
State Department of Education

Description of Demonstration Model:
Developmental Therapy is a psychoeducational curriculum for teaching young children with severe emotional and behavioral disorders. The approach has particular pertinence to children between the ages of 2 and 8 years and is applicable to children of varying ethnic and socioeconomic groups. The basic curriculum areas are behavior, communication, socialization and (pre)academics. Within each of these areas, a series of developmental objectives are sequenced into stages of therapy. The project uses these objectives as a measure of child progress.

Major Outreach Goals:
- To stimulate increased, specialized, high-quality services to seriously emotionally disturbed and other handicapped children aged 2 to 8 years and their parents and teachers.
- To offer technical assistance to selected target audiences and individuals to facilitate the use of the Rutland Center Developmental Therapy Model.

Major Outreach Services:
The project assists in program planning and design and staff development, including identification and referral process, intake and diagnostics, developmental therapy curriculum, school liaison, parent services and staff evaluation. In addition, the project disseminates information and assists in establishing an effective evaluation system.

Features and Products:
Materials available include textbooks, films, videotapes and brochures.

Forty sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

FAMILY INTERVENTION PROJECT - OUTREACH (FIP)

Address: Box 664, Georgia State University
University Plaza
Atlanta, GA 30303

Phone: 404/658-3270
Year of Outreach Funding: I

Fiscal Agency: Georgia State University

Project Staff: Michael Berger, Director; Debby S. Guthrie, Coordinator
special educator, physical therapist, child clinical psychologist, behavioral psychologist, clinical psychologist

Source of Continuation Funding for Service Delivery Program:
54 percent: Fulton County Commission
46 percent: Atlanta City Council

Description of Demonstration Model:
The Family Intervention Project (FIP) serves handicapped children aged birth to 5 years and their families residing in Atlanta. FIP provides home- and clinic-based educational/therapeutic services by training family members to deliver direct service for the child.

Major Outreach Goals:
- To disseminate information to the community about the handicapped preschooler.
- To train professionals and paraprofessionals serving families with handicapped members.
- To educate existing agencies in the importance of family involvement.

Major Outreach Services:
The project offers consultation in special education, family therapy, physical therapy, speech pathology, workshops, conferences, inservice training and needs assessment development. In addition, the project provides technical assistance to existing programs or to those interested in implementing the FIP model.

Features and Products:
FIP creates a supportive environment within the extended family and within the social network of the family. These individuals are all involved with programming.

Seven sites are known to be using components of the demonstration model.

PRECISE EARLY EDUCATION FOR CHILDREN WITH HANDICAPS (PEECH PROJECT)

Address: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, IL 61820

Phone: 217/333-4894
Year of Outreach Funding: 7

Fiscal Agency: Institute of Child Behavior and Development

Project Staff: Merle B. Karnes, Director; Anna Marie Kokotovic, Coordinator
NDN coordinator, replication specialists, evaluator

Source of Continuation Funding for Service Delivery Program:
Grant agreement between Rural Champaign County Education Cooperative and the University of Illinois

Description of Demonstration Model:
PEECH is a center-based program serving handicapped children aged 3 to 5 years and their families. Although the primary population is the mildly to moderately handicapped, procedures have been adapted for lower functioning, sensory impaired children. The project obtains pre and posttest data on all children. Teachers assess each child's abilities, set individualized goals and objectives and continually evaluate child progress.

Major Outreach Goals:
- To train site personnel in procedures for developing, implementing and demonstrating a model early education program for preschool handicapped children.
- To prepare and disseminate materials to assist early childhood personnel in the education of handicapped children.

Major Outreach Services:
In addition to intensive training provided to each year's replication sites, PEECH annually conducts an average of 45 components workshops and 15 awareness workshops on topics relevant to early childhood special education. The project mails materials to over 8,000 interested professionals throughout the U. S. People from every state and several foreign countries visit the demonstration site each year.

Features and Products:
Available from the project are manuals on classroom planning and programming, manuals on family involvement and handouts describing components of the early childhood special education program.

Thirty-eight sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

RETRIEVAL AND ACCELERATION OF PROMISING YOUNG HANDICAPPED AND TALENTED (RAPYHT)

Address: Colonel Wolfe School
403 East Healey
Champaign, IL 61820

Phone: 217/333-4891
Year of Outreach Funding: 3

Fiscal Agency: University of Illinois

Project Staff: Merle B. Karnes, Director; Mary H. Svoboda, Coordinator outreach specialist, evaluator

Source of Continuation Funding for Service Delivery Program:
Joint agreement between Rural Champaign County Educational Cooperative and the University of Illinois

Description of Demonstration Model:
The RAPYHT model is a complete approach to identifying and programming for gifted/talented handicapped children aged 3 to 6 years in a variety of preschool special education settings. The project provides services to teachers who assess and improve individual talent area capabilities and offers information and materials to families of gifted/talented children. Pre and posttest data, obtained on all children, offers additional areas of emphasis for programming.

Major Outreach Goals:
- To train site personnel to screen, identify, assess and provide appropriate educational services for gifted/talented handicapped preschoolers.
- To facilitate awareness and disseminate materials to improve services for gifted/talented handicapped preschoolers.

Major Outreach Services:
The project offers outreach specialists, regular visits to the site, inservice training workshops at the site and printed materials to facilitate implementation of the model.

Features and Products:
Research results show that RAPYHT programming promotes growth in creative thinking, social functioning and motivation to achieve. The Preschool Talent Checklist and the Nurturing Talent in Early Childhood series (in eight talent areas) are available from the project.

Eight sites are known to be using components of the demonstration model.

MACOMB 0-3 REGIONAL PROJECT: A RURAL CHILD/PARENT SERVICE

Address: 27 Horrabin Hall
Western Illinois University
Macomb, IL 61455

Phone: 309/298-1634
Year of Outreach Funding: 3

Fiscal Agency: Western Illinois University

Project Staff: Patricia L. Hutinger, Director; Cathmar Prange, Coordinator trainer/replicator, program evaluator

Source of Continuation Funding for Service Delivery Program:
State of Illinois Department of Mental Health/Developmental Disabilities (McDonough County Rehabilitation Center and Fulton County Community Workshop and Training Center, Inc.)

Description of Demonstration Model:
The project provides a home-based remediation/education service to handicapped children aged birth to 3 years and their families. This rural, infant, service delivery model provides home visits and sharing centers which incorporate child activities, parent/study topics and water activities. Parents are involved in all activities. The model project demonstrates significant child gain based on Core Curriculum activities.

Major Outreach Goals:
- To increase high quality specialized services in rural areas to handicapped and high-risk children aged birth to 3 years and their parents.
- To develop an effective Outreach model for rural communities.

Major Outreach Services:
Services include awareness; stimulation of replication sites; training of other providers; consultation; state involvement and coordination; product development, refinement and revision; and Rural Consortium activities.

Features and Products:
Parents are involved in all activities of this home-based rural program. The Sharing Center, a unique component of the program, is a popular and effective means of bringing parents and children together to engage in learning activities. The project has developed and made available four books and 31 "Baby Buggy" papers; all topics pertain to the implementation and operation of an infant project. In addition, the project has developed a series of videotapes and slide-tapes for use in training and public awareness activities by project staff.

Fifteen sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

PEORIA 0-3 OUTREACH PROJECT

Address: 320 East Armstrong Avenue
Peoria, IL 61603

Phone: 309/672-6358
Year of Outreach Funding: 6

Fiscal Agency: United Cerebral Palsy of Northwestern Illinois
Peoria Association for Retarded Citizens

Project Staff: Karen Merrill Hurst, Director
registered physical therapist, speech/language pathologist, child development specialist, evaluator/materials coordinator, secretary

Source of Continuation Funding for Service Delivery Program:
Department of Mental Health and Developmental Disabilities, United Fund, contributions and service fees.

Description of Demonstration Model:
The project is based on a developmental task analysis approach to prescriptive teaching delivered primarily in the home by parents. The program serves mildly to severely developmentally delayed children aged birth to 3 and their families. The service program's components include: awareness and identification of young handicapped children; comprehensive diagnostic and evaluation services; IPP planning and home-based programming using the Functional Profile to assess child progress; center-based programming; occupational, physical and speech/language therapy; and parent education and support.

Major Outreach Goals:
- To improve the quality of intervention services to developmentally delayed children aged birth to 3 and their families.
- To provide on-site technical assistance, training and supplemental materials for agencies initiating or expanding services based on the Peoria 0-3 Model.
- To demonstrate a comprehensive system of services which could be adapted to both rural and urban settings.
- To develop materials for dissemination, increase awareness and facilitate development of programs for unserved and underserved handicapped infants/toddlers and their families.

Major Outreach Services:
The project provides technical assistance and training to replicating programs with The Peoria 0-3 Replication Rating Scale. Awareness, introductory and topical workshops are held each year at the local, state, regional and national levels. In addition, the project disseminates thousands of project materials each year.

Features and Products:
These materials are available: slide-tape presentations (on both normal and abnormal motor development); videotapes on alternate communication and the development of normal movement; a program manual; handouts on parent education, motor and speech/language development; the Functional Profile (child progress assessment instrument birth to 6); and others.

One hundred nineteen sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981.

PROJECT RHISE/OUTREACH

Address: 650 North Main Street
Rockford, IL 61103

Phone: 815/965-6766
Year of Outreach Funding: 4

Fiscal Agency: Children's Development Center

Project Staff: Steven Lynn Smith, Director
one training consultant, two training consultants (50%), secretary

Source of Continuation Funding for Service Delivery Program:
Illinois Department of Mental Health, United Way, fees, gifts and contributions.

Description of Demonstration Model:
The program serves handicapped infants aged birth to 3 using the Consultancy Model at both home- and center-based sites. Parents are the primary facilitators of their child's development, thus the program emphasizes parent training and support through the parent-to-parent approach. A strong organizational framework and community relations activities round out the comprehensive program. Clinical consultants measure child progress through formal standardized assessment, while the parent-infant educator uses educational assessment.

Major Outreach Goals:
- To develop comprehensive programs for handicapped infants.
- To provide long-term training and topical workshops.
- To disseminate project materials, initiate community awareness activities and facilitate state-level involvement (e.g., state consortium).

Major Outreach Services:
The project's technical assistance includes program needs assessments, long-term training for model replication, short-term training, topic specific workshops, on-site consultation, observation and training at Children's Development Center demonstration site, product dissemination and information services.

Features and Products:
The Consultancy Model is being replicated in both rural and urban settings. Available materials include a curriculum syllabus, developmental checklist, parent needs assessment, parent learning packages, parent-developed filmstrip, child find workshop proceedings monograph, bibliographies and program description articles.

Sixteen sites are known to be using components of the demonstration model.

HOME LEARNING CENTER

Address: 305 North McKinley
Muncie, IN 47306

Phone: 317/285-4940
Year of Outreach Funding: 3

Fiscal Agency: Ball State University

Project Staff: Joan Osgood, Director
parent adviser, audiologist

Source of Continuation Funding for Service Delivery Program:
Ball State University and Indiana Division of Special Education

Description of Demonstration Model:
Since the critical period for language learning is from birth to 2 years, children previously labelled deaf can, with modern hearing aides, learn to talk. In a home-based program, parents "feed in" language to their child aged birth to 3 years in the course of daily activities. A preschool program provides structured language learning to children aged 3 to 5 years.

Major Outreach Goals:
- To locate hearing impaired children before aged 2 years, provide hearing aids and help their parents teach them to talk.

Major Outreach Services:
The project promotes awareness, provides training and technical assistance and develops and distributes products.

Features and Products:
The Home Learning Center uses binaural amplification with infants and young children with severe and profound hearing losses.

One site is known to be using components of the demonstration model.

PROJECT FOR EARLY EDUCATION OF EXCEPTIONAL CHILDREN (PEEEC)

Address: Special Education Building
Murray State University
Murray, KY 42071

Phone: 502/762-6965
Year of Outreach Funding: 1

Fiscal Agency: West Kentucky Educational Cooperative

Project Staff: Melba Casey and Bob Kibler, Co-Directors
instructional resource coordinator, parent involvement coordinator

Source of Continuation Funding for Service Delivery Program:
Murray Independent and Calloway County Schools, Caldwell County Schools

Description of Demonstration Model:
PEEEC offers Home-School Instruction (home-based) services or Developmental Learning Center (classroom) services to multihandicapped and some high-risk children aged 3 to 8 years. The project uses diagnostic-prescriptive methods of intervention and provides annual preschool screening for 2½- to 5½-year-old children in the community. Individualized parent services are based on a needs assessment.

Major Outreach Goals:
- To develop and implement an effective Outreach model.
- To provide awareness activities to increase services.
- To develop and distribute products to enhance quality of services.
- To provide training and technical assistance to early childhood providers in order to ensure comprehensive educational planning and to stimulate high quality programs throughout western Kentucky and other designated sites.
- To stimulate state involvement in the support and provision of programs.

Major Outreach Services:
The project disseminates products and information and provides training and technical assistance to interested sites.

Features and Products:
The project is represented on the Planning and Policy Committee of the HCEEP National Rural Consortium and the Kentucky State Advisory Committee for Handicapped Services in Head Start. Project staff are working with the Bureau of Education for Exceptional Children, Kentucky Department of Education, to implement the state plan for preschool services.

HEARING IMPAIRED PROJECT OUTREACH

Address: 120 West 7th Street
Owensboro, KY 42301

Phone: 502/685-3131 ext 269
502/685-3131 ext 266
Year of Outreach Funding: 1

Fiscal Agency: Brescia College

Project Staff: Markel K. Drum, Director; Gene Ann Young, Coordinator assistant coordinator

Source of Continuation Funding for Service Delivery Program:
Brescia College, Bureau of Education for Exceptional Children (BEEC), local contributions

Description of Demonstration Model:
The model uses a high-risk registry and a public information program to provide early identification services for hearing impaired young children. The project also provides parent counseling and training. The project uses the LAP-D and LAP-D C-HI for behavioral assessment.

Major Outreach Goals:
- To provide early identification services and audiological management to families of hearing impaired children.
- To facilitate family involvement in the education of their hearing impaired child.

Major Outreach Services:
The project provides training and technical assistance, develops and disseminates products and stimulates state involvement in the support and provision of programs.

Features and Products:
The adaptation of the LAP-D for children with hearing impairment is a unique feature of this project. The project will hold training in the use of this tool at four sites during January, February and March 1981.

Seven sites are known to be using components of the demonstration model.

WASHINGTON COUNTY CHILDREN'S PROGRAM OUTREACH PROJECT

Address: P. O. Box 311
Machias, ME 04654

Phone: 207/255-3426
Year of Outreach Funding: I

Fiscal Agency: Child and Youth Board of Washington County

Project Staff: Jane Weil, Director
training coordinator, product development coordinator, trainers, secretary

Source of Continuation Funding for Service Delivery Program:
Department of Human Services, Department of Mental Health (Bureau of Mental Retardation and Bureau of Children's Services), Developmental Disabilities Council, Department of Education (Interdepartmental Preschool Program), CETA, private foundation and local fund-raising activities

Description of Demonstration Model:
The primarily home-based model stresses placement of children in normal group settings (nursery schools, Head Start, family day care homes). The project aides in forming play groups and mother groups when community group settings do not exist. The project uses CIP as a screening tool and the Brigance to develop individual programs.

Major Outreach Goals:
- To increase services to handicapped children aged birth to 5 years.
- To improve the quality of services by replicating components of the WCCP model and providing program evaluation and training to selected agencies and programs.
- To affect policy, legislative and funding decisions.
- To develop and disseminate printed materials for use in Maine and other states.

Major Outreach Services:
The project provides ongoing training to a minimum of five agencies and programs in Maine, produces print and audiovisual materials, and has organized the Maine Early Intervention Consortium.

Features and Products:
Materials available include:
- Helping Parents Grow: a booklet developed as a companion to Helping Children Grow, developed during the demonstration years
- a set of materials on developing and working with mothers' groups
- a set of audio tapes of interviews with three parents of handicapped children
- a revised speech/language questionnaire and a prenatal questionnaire
- materials on funding sources
- a sample Administrative Policies and Procedures Manual
- a revised program evaluation tool

Two sites are known to be using components of the demonstration model.

EARLY RECOGNITION INTERVENTION NETWORK OUTREACH PROGRAM (ERIN)

Address: 376 Bridge Street
Dedham, MA 02026

Phone: 617/329-5529
Year of Outreach Funding: 3

Fiscal Agency: Early Recognition Intervention Network, Inc.

Project Staff: Marian L. Hainsworth, Director
evaluation/dissemination specialist, training/support specialist, two training/support assistants, field staff assistant, secretary

Source of Continuation Funding for Service Delivery Program:
Local public school

Description of Demonstration Model:
The ERIN system features special and regular education settings. The specialized combination preschool/home programs serve children aged 2 to 7 years with moderate to severe special needs and their parents. The regular early childhood and primary K-1 program serves mildly to moderately handicapped children who are integrated with nonhandicapped children.

Major Outreach Goals:
- To increase the number of children served and improve the quality of programs using the ERIN model.
- To assist 20 Outreach sites in seven states to develop quality demonstrations of the ERIN model.
- To provide services through these sites to other groups in their states.
- To disseminate ERIN print and audiovisual material.
- To provide summer training programs.

Major Outreach Services:
ERIN conducts a five-day Leadership Training Institute for trainers and coordinators, a Specialized Implementor's Conference and Regional Mainstream Workshops. The project provides additional training and support to trainers and implementors via Special Topic Central Workshops. The project makes four to six on-site visits to each replication program. ERIN is developing printed modules and disseminating awareness material.

Features and Products:
Project-developed materials include:
- preschool screening systems
- Implementing the ERIN Program: modules on environment, evaluation/screening, planning and teaching, with support slide-tapes and materials
- resource books on language, visual, perceptual, motor and body awareness and control
- First Steps Guidebook I -- Increasing Family Participation

A complete list is available from ERIN.

Twenty sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

LEARNING IN INTEGRATED CLASSROOMS (LINC OUTREACH)

Address: 28 Sawyer Avenue
Medford, MA 02155

Phone: 617/628-5000 ext 6116
Year of Outreach Funding: 3

Fiscal Agency: Tufts University

Project Staff: Lane W. Gunnoe, Director
two staff development specialists, two major consultants, secretary

Source of Continuation Funding for Service Delivery Program:
Tufts University

Description of Demonstration Model:
The demonstration model is developmental, emphasizing individualized instruction within the mainstreamed classroom

Major Outreach Goals:
- To increase and improve appropriate educational opportunities for young mildly and moderately handicapped children and their families.
- To increase awareness of the need for early intervention and the potential benefits of mainstreamed programs.
- To train early childhood teachers and potential trainers of early childhood teachers to implement a successful mainstreamed classroom program.
- To assist interagency cooperation in order to realize an effective, coordinated continuum of services to young handicapped children and their families.

Major Outreach Services:
LINC provides long-term (one year or more) inservice, field-based training to regular classroom kindergarten and preschool teachers and trainers of teachers, topic-specific workshops, consultation, technical assistance and problem solving.

Features and Products:
LINC has developed the following:
- slide-tape presentations on mainstreaming
- First Steps in Mainstreaming
- A Guide for Trainers
- Mainstreaming Challenges: a training manual

Twenty-five sites are known to be using components of the demonstration model.

PROJECT OPTIMUS/OUTREACH

Address: 77 Parkingway
Quincy, MA 02169

Phone: 617/471-0350
Year of Outreach Funding: 3

Fiscal Agency: South Shore Mental Health Center

Project Staff: Geneva Woodruff, Director
therapeutic coordinator, parent coordinators, education coordinator, administrative assistant

Source of Continuation Funding for Service Delivery Program:
United Way of Massachusetts, third-party payments, Title XX funds, and endowment fund

Description of Demonstration Model:
Project First, the demonstration component, is a center- and home-based program for handicapped children aged birth to 3 years and their families. Project First employs a modified transdisciplinary approach, using a primary provider for direct services and a team to assess, plan and evaluate. Therapeutic and educational staff measure child progress every three months using developmental assessment and observation.

Major Outreach Goals:
- To train program administrators and personnel serving developmentally delayed children aged birth to 5 years and their families.
- To provide quality services to handicapped children, particularly those with moderate to severe disabilities.

Major Outreach Services:
Workshops, replication, and technical assistance and materials development constitute the major portion of the project's training efforts.

Features and Products:
Materials developed by the project include:
- The Parent Involvement Manual
- slide-tapes on the transdisciplinary service delivery model
- slide-tapes on parental involvement in the transdisciplinary team

Eighteen sites are known to be using components of the demonstration model.

HIGH/SCOPE FIRST CHANCE OUTREACH PROJECT

Address: 600 North River Street
Ypsilanti, MI 48197

Phone: 313/485-2000
Year of Outreach Funding: 4

Fiscal Agency: High/Scope Educational Research Foundation

Project Staff: Bernard Banet, Director; Elisabeth Schaefer, Coordinator
education consultants

Source of Continuation Funding for Service Delivery Program:
High/Scope Educational Research Foundation

Description of Demonstration Model:
The project is located in an integrated classroom, where the Cognitively Oriented Preschool Curriculum has been shown to have a positive impact on both nonhandicapped and handicapped children. The curriculum, based on Piaget's theory of child development, presents a framework for supporting the total development of the child.

Major Outreach Goals:
- To provide quality services to young handicapped and nonhandicapped children.
- To disseminate program information.
- To select and provide technical assistance and training to five replication sites.
- To certify selected replication site staff who will provide dissemination activities in their local areas.

Major Outreach Services:
The project conducts needs assessments, training visits and services, onsite consultations, demonstration classrooms, teacher and trainer institutes, project evaluations and monitoring assistance to replication sites and to projects interested in replication. The project also disseminates the High/Scope curriculum and provides awareness information through introductory workshops, mail and telephone contacts.

Features and Products:
The High/Scope curriculum is documented in Young Children in Action: A Manual for Preschool Educators. Many audiovisual materials are available to support training in this curriculum model. Trainer's modules, providing training activities coordinated with media lists and supporting handouts, are scheduled for publication in 1981. Pre and posttesting with the McCarthy Scales indicate that the children, as a group, advanced 2.02 months in mental age for each month in the program.

Sixty-one sites are known to be using components of the demonstration model.

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EARLY EDUCATION OUTREACH

Address: 1930 Como Avenue
St. Paul, MN 55108

Phone: 612/644-2001
Year of Outreach Funding: 5

Fiscal Agency: St. Paul Public Schools

Project Staff: Virginia M. Bunker, Director/Coordinator
media consultant, media assistant, parent program/teacher consultant, speech and language consultant, occupational therapist consultant, evaluator/teacher consultant, secretary

Source of Continuation Funding for Service Delivery Program:
Funded as a public school special education program by Minnesota state and through local reimbursement formulas.

Description of Demonstration Model:
The demonstration model is a cognitively-oriented, family-centered intervention and remediation program for children aged birth through 5 who are significantly developmentally delayed. The program includes a full range of services, with frequent combinations of center- and home-based teaching to foster parents as teachers in both settings. The program uses the criterion-referenced Vulpe Assessment Battery and is field testing its curriculum.

Major Outreach Goals:
- To provide technical assistance to early/special education programs throughout Minnesota in an interagency agreement with the Minnesota Preschool Incentive Grant Regional Consultants' Network.
- To complete field testing the project's curriculum by May 1981.

Major Outreach Services:
The project has developed a resource lending library for staff and parents. It provides program evaluation consultation and distributes a statewide early childhood special education newsletter.

Features and Products:
Project-developed materials include a manual of philosophy and objectives for parent involvement (Reach Out: How Teachers Involve Parents in Preschool Programs for Children with Special Needs), a 25-minute training videotape and manual for stimulating speech and language development of preschool handicapped children and an "awareness" slide-tape program (The Role of the Occupational Therapist in a Preschool Setting). St. Paul Outreach provides its services throughout Minnesota in an interagency agreement with the Minnesota Preschool Regional Consultants who are funded through the Minnesota Preschool Incentive Grant.

Seventy-five sites are known to be using components of the demonstration model.

EARLY EDUCATION CENTER OUTREACH PROJECT

Address: P. O. Box 10356
Westland Station
Jackson, MS 39209

Phone: 601/353-1664
Year of Outreach Funding: 2

Fiscal Agency: Early Education Center, Christian Educational Services, Inc.

Project Staff: Stephen J. Robertson, Director; Martha Phillips, Coordinator trainer, secretary/bookkeeper

Source of Continuation Funding for Service Delivery Program:
State Department of Public Welfare Title XX, State Department of Mental Health, Developmental Disabilities, state appropriations and community donations.

Description of Demonstration Model:
The model program provides developmental training for handicapped children aged birth to 5 years. A multidisciplinary team designs programs to meet each child's individual needs. Staff use the "clipboard system" to record systematically child progress. This system provides performance data in the areas of gross and fine motor, social, language, self-help, cognitive and behavioral skills.

Major Outreach Goals:
- To stimulate replication and adaptation of the model.
- To provide technical assistance and training.
- To conduct workshops and seminars to professionals and paraprofessionals serving young handicapped children.
- To disseminate information and materials to increase public awareness.

Major Outreach Services:
The project has provided training to 30 agencies and groups and has sponsored or participated in five major workshops statewide. It has also contributed to developing and updating the MESH Resource Directory, now in its second printing.

Features and Products:
The project has developed the following modules: programming for individual needs, the EEC Clipboard System, augmentative communication, therapeutic feeding, children's developmental disabilities, programming from assessment instruments and the EEC Model. The following materials are available:
- Outreach Training Modules: pre/posttests, curriculum, handouts, overheads, videotapes and slide presentations
- MESH Resource Directory: a comprehensive listing of agencies serving young handicapped children in Mississippi
- Feeding/Language Assessment: a checklist of feeding patterns and prelanguage skills

Six sites are known to be using components of the demonstration model.

PROJECT RUN/OUTREACH

Address: P.O. Box 967
Oxford, MS 38655

Phone: 601/234-1476
Year of Outreach Funding: 2

Fiscal Agency: North Mississippi Retardation Center

Project Staff: Genora S. Holloway, Director
program development specialist, training specialist, secretary

Source of Continuation Funding for Service Delivery Program:
North Mississippi Retardation Center.

Description of Demonstration Model:
Project RUN offers a diagnostic/therapeutic program for children who are functioning at a preschool developmental age and who are severely/profoundly multiply handicapped. The Project RUN Assessment/Curriculum is used for each child's treatment program. The system includes four areas of infant development (auditory discrimination, visual-fine motor, communication and gross motor) within the birth to 48 month age range. The program employs behavior modification principles of reinforcement and prompting cues for eliciting desired responses, and one-to-one programming is utilized for program implementation. A special education teacher (who also serves as the child's case manager), a teacher aid and a physical therapy aide carry out the treatment program. Other center interdisciplinary staff are also involved in formulating and implementing the program. The ultimate goal of the program is to prevent institutionalization or to facilitate deinstitutionalization of young severely/profoundly multiply handicapped children.

Major Outreach Goals:
- To stimulate high quality service programs for pre-school handicapped children and their families through an effective outreach/demonstration model.
- To effect increased interest in serving the young severely/profoundly handicapped through awareness and coordination activities.

Major Outreach Services:
Project RUN offers replication and model utilization assistance, awareness and coordination activities, and training to interested projects. In addition, the project develops and disseminates products and information.

Features and Products:
A 4-day workshop at the facility and 4 days of technical assistance at the agency site is provided for replication/utilization of the model. Several types of assistance for training are offered to university students and direct service agency staff, from 1 day or less to over 300 hours. Assistance is offered through presentations/short-term workshops and dissemination of printed materials to a national audience. The project-originated materials include A Parent Component: Involvement and Training, Learning is Fun: A Guide for Parents, Project RUN - Bibliography of Resources for Serving the Handicapped, and Project RUN Early Education Assessment Curriculum for the Severely/Profoundly Multiply Handicapped.

Eleven sites are known to be using components of the demonstration model.

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CENTRAL INSTITUTE FOR THE DEAF EARLY EDUCATION PROJECT

Address: 818 South Euclid
St. Louis, MO 63110

Phone: 314/652-3200
Year of Outreach Funding: 7

Fiscal Agency: Central Institute for the Deaf

Project Staff: Audrey Simmons-Martin, Director; Susan McCarthy, Coordinator trainer, cooperating teachers, co-director, audiologist, psychometrist, evaluator

Source of Continuation Funding for Service Delivery Program:
Central Institute for the Deaf

Description of Demonstration Model:
This is an early intervention program for families of hearing impaired children aged birth to 4 years, designed to help parents assume their natural role as the child's primary language teacher.

Major Outreach Goals:
- To provide training to professionals providing services to preschool children and their parents.

Major Outreach Services:
Awareness activities, product development, stimulation of high quality programs, stimulation of states, personnel preparation and consultative assistance.

Features and Products:
The project staff holds parent-oriented, individualized sessions in a demonstration home setting to teach parents strategies and techniques suitable for use in their own homes.

Thirty-five sites are known to be using components of the demonstration model.

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PROJECT SUNRISE OUTREACH

Address: Institute for Habilitative Services
Eastern Montana College
Billings, MT 59101

Phone: 406/657-2250
Year of Outreach Funding: I

Fiscal Agency: Eastern Montana College

Project Staff: Ronald P. Sexton, Director; Kay P. Walker, Coordinator special educator, two graduate assistants, secretary

Source of Continuation Funding for Service Delivery Program:
Local education agency

Description of Demonstration Model:
The project delivers service through a home-based parent training model. Home visitors, trained and supervised by project special educators, make weekly visits to the homes of participating families. The project uses the Alpern-Boll as a pre/post measure of child progress. Program assessments are administered quarterly.

Major Outreach Goals:
- To replicate the Sunrise model.
- To increase awareness among community leaders of the value of early education.
- To establish a statewide communication and training network.

Major Outreach Services:
The project staff provides preservice and inservice training in the use of the Sunrise model. The project also offers workshops designed to meet the needs of educators, Head Start staff and others working with young handicapped children and their families.

Features and Products:
- The Project Sunrise Model: A home-based parent training program and paraprofessional training program
- VIEWS: An early childhood special education newsletter published quarterly
- Proceedings Document: A summary of the Second Annual Montana Symposium on Early Education and the Exceptional Child (available June 1981)

Two sites are known to be using components of the demonstration model.

CHAPEL HILL TRAINING-OUTREACH PROJECT

Address: Lincoln Center
Merritt Mill Road
Chapel Hill, NC 27514

Phone: 919/967-8295
Year of Outreach Funding: 9

Fiscal Agency: Chapel Hill-Carrboro Public Schools

Project Staff: Anne R. Sanford, Director
special education coordinator, family involvement coordinator, secretary, evaluation consultant

Source of Continuation Funding for Service Delivery Program:
State Incentive Grants from North Carolina and Kentucky; Administration for Children, Youth and Families; Title I and Division of Mental Health Services

Description of Demonstration Model:
The project establishes individual learning objectives for children using the LAP and parental needs assessments. The Chapel Hill model offers a variety of service delivery systems including center- and home-based, resource room and maistream settings. Teacher training in task analysis, behavior modification and parent involvement are basic model components, in addition to the assessment-curriculum design.

Major Outreach Goals:
- To stimulate replication of the Chapel Hill model in new programs for young handicapped children and their families through incentive grants by North Carolina and Kentucky SEA funding.

Major Outreach Services:
The Kentucky State Department of Education has applied all of its incentive grant funds to the replication of the Chapel Hill model in 153 counties. The Chapel Hill-Carrboro Schools have established a model replication site for children aged 3 to 5 years.

Features and Products:
The United Arab Republic is translating and adapting the Chapel Hill model throughout Egypt. The project provided two weeks of intensive training to personnel in Guam to replicate the model in public health and department of education programs. The Chapel Hill materials have been translated into Korean and form the basis for preschool programs in that country. Project-developed materials include slide-tape programs, public service announcements, manuals and other print materials on topics such as assessment, curriculum, family involvement, P. L. 94-142 and competency-based training. Contact the project for a comprehensive listing of materials.

Five hundred eighty-three sites are known to be using components of the demonstration model.

INFANT STIMULATION/MOTHER TRAINING

Address: University of Cincinnati College of Medicine
Department of Pediatrics
231 Bethesda Avenue
Cincinnati, OH 45267

Phone: 513/872-5341
Year of Outreach Funding: 1

Fiscal Agency: Cincinnati General Hospital, Department of Pediatrics

Project Staff: Earladeen Badger, Director; Nancy Elder, Coordinator
USEP coordinator, pediatric nurse, physician's assistant, special educator, paraprofessional teacher

Source of Continuation Funding for Service Delivery Program:
Cincinnati General Hospital, Department of Pediatrics (Newborn Division) and State Department of Health (Maternal and Child Health)

Description of Demonstration Model:
The project offers a hospital-based (neonatal, special-care nursery), early education intervention program in infant stimulation and parent education and support. The project provides comprehensive services during infants' first year of life.

Major Outreach Goals:
- To increase the number of hospital-based early intervention programs.
- To demonstrate the importance of primary prevention programs carried out during the first year of life.
- To coordinate the birth-to-three program in Ohio through USEP activities.

Major Outreach Services:
The project trains hospital-based infant and maternity nursing staff through a four-day short course and on-site consultation.

Features and Products:
The project trains nurses in infant stimulation and parent education programs.

Eight sites are known to be using components of the demonstration model.

PROJECT SHAPE
ADAPTIVE EDUCATION FOR SEVERELY/PROFOUNDLY HANDICAPPED

Address: P. O. Box 200
Beaverton, OR 97005

Phone: 503/222-5361
Year of Outreach Funding: 2

Fiscal Agency: Beaverton District #48

Project Staff: Doris Rosen, Director
speech and language therapist, educator, outreach trainer

Source of Continuation Funding for Service Delivery Program:
State General Fund, Division of Mental Health, Mental Retardation/Developmental Disabilities Preschool Programs.

Description of Demonstration Model:
Project SHAPE serves preschool children who are severely/profoundly handicapped. The project uses a sequenced sensorimotor curriculum with a teacher training manual.

Major Outreach Goals:
- To field-test training strategies with professionals delivering educational services to severely/profoundly handicapped preschool children.

Major Outreach Services:
The project's major service is to implement training strategies and curriculum at the outreach location and to provide consistent follow-up and data probes on trainee competencies.

Features and Products:
Training strategies incorporate manual guidance of fine motor activities, using developmentally appropriate motor movements.

Twelve sites are known to be using components of the demonstration model.

TEACHING RESEARCH INFANT AND CHILD CENTER DATA-BASED CLASSROOM

Address: Todd Hall
Monmouth, OR 97361

Phone: 503/838-1220 ext401
Year of Outreach Funding: 6

Fiscal Agency: Division State System of Higher Education

Project Staff: Torry Piazza Templeman, Director
inservice trainers

Source of Continuation Funding for Service Delivery Program:
Local education agency

Description of Demonstration Model:
The project is a center-based behavioral program, emphasizing individualized instruction, trial by trial data and the use of volunteers to conduct instruction. A task-analyzed developmental curriculum is used.

Major Outreach Goals:
- Quality replication of the model's key elements.

Major Outreach Services:
The project offers 5-day demonstration center training and two follow-up technical assistance visits at the trainee's work site.

Features and Products:
The project offers demonstration center training. The project staff identifies inservice objectives and provides evaluation at the time of training and follow-up.

One hundred fifty sites are known to be using components of the demonstration model.

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FAMILY CENTERED RESOURCE PROJECT-OUTREACH (FCRP)

Address: 2900 St. Lawrence Avenue
Reading, PA 19606

Phone: 215/779-7111
Year of Outreach Funding: 3

Fiscal Agency: Pennsylvania Department of Education

Project Staff: Gilbert M. Foley, Director; Lynn L. Brown, Coordinator
resource manager, pediatric consultant, physical therapist, occupational therapist, psychiatric social worker.

Source of Continuation Funding for Service Delivery Program:
Berks County Intermediate Unit #14 - EHA-B Preschool Program

Description of Demonstration Model:
FCRP serves multihandicapped infants and preschoolers in a family context, with emphasis on children with mental retardation and neuromotor dysfunction. The project's theoretical orientation integrates a developmental frame of reference with object-relation analysis. This approach implies sequential learning and mastery of skills to meet age-appropriate expectations. Service delivery is transdisciplinary.

Major Outreach Goals:
- To increase and enhance services to preschool handicapped children in Pennsylvania through awareness training and replication of the FCRP Model.
- To train preschool personnel in the model and methodologies of FCRP including the transdisciplinary approach, mastery of developmental tasks training, family development planning, assessment and facilitation of attachment.

Major Outreach Services:
The project provides needs assessments, participatory conferences, individualized technical assistance for component replication, follow-up site visits, training and college courses.

Features and Products:
FCRP uses both transdisciplinary team training generalized to kindergarten and school age children and team training in the transactional approach to child development. Project staff have expertise in theory and therapy related to parental loss and grief reactions to the birth of a handicapped child and the process of attachment-separation-individuation in handicapped children. Products include:
- Cognitive Observation Guide
- Family Development Planning
- Attachment-Separation-Individuation Scale
- Kindergarten Motor Screening

Fourteen sites are known to be using components of the demonstration model.

EDUCATION FOR SEVERELY HANDICAPPED OUTREACH PROGRAM

Address: Box 64,
Foster, RI 02825

Phone: 401/822-4622
Year of Outreach Funding: 2

Fiscal Agency: Educational Technology Center, Inc.

Project Staff: Edmond S. Zuromski, Director; Karen U. Zuromski, Coordinator
two field consultants including a psychologist and special education teacher, engineer, adaptive equipment technician, physical therapist, speech therapist

Source of Continuation Funding for Service Delivery Program:
Local agencies and State of Rhode Island

Description of Demonstration Model:
The Active Stimulation Program, a behavior-based educational model, develops curriculum and equipment for severely/profoundly handicapped children based on the use of response-contingent sensory stimulation. The project provides services at home, at school and at a state institution. The project measures child progress by an N=1 design built into individual activities, a project-developed Behavioral Checklist, the Hoskins-Squires Test for Reflex and Gross Motor Development and the Callier-Azusa Scale.

Major Outreach Goals:
- To provide training to teachers, therapists and parents on the theory and technique of active stimulation (the combined use of adaptive devices and contingent sensory reinforcement to teach basic skills to severely/profoundly handicapped children).
- To provide training in the areas of behavioral management, handicaps of infancy and childhood and the use of technology to teach the severely/profoundly handicapped.
- To stimulate replication sites for the Active Stimulation Program.
- To solve technological problems, especially those relevant to the severely/profoundly handicapped child.

Major Outreach Services:
The project conducts workshops on the theory and technique of the Active Stimulation Program, develops and evaluates programs for severely/profoundly handicapped children and designs technological aids for learning and communication.

Features and Products:
The curriculum based on the use of assistive devices and a manual on the Active Stimulation Program are available from the project. The project also provides consultations on educational technology.

Twenty-seven sites are known to be using components of the demonstration model.

PROJECT SCOOTER FOR HEARING-IMPAIRED CHILDREN

Address: 819 Barnwell Street
Columbia, SC 29208

Phone: 803/777-7876
Year of Funding: 1

Fiscal Agency: University of South Carolina

Project Staff: Joan C. Rollins, Director
audiologist/trainer, teacher/trainer

Source of Continuation Funding for Service Delivery Program:
Public schools, University of South Carolina and Richland Memorial Hospital

Description of Demonstration Model:
The project provides a High-Risk Register Program in area hospitals, a parent/infant program, a toddler's program and a parent program.

Major Outreach Goals:
- To create statewide awareness among professionals and the general public of the need for the early identification and education of young hearing-impaired children.
- To provide training for professionals throughout the state.
- To stimulate and train personnel from other agencies in South Carolina to develop and implement mechanisms for effective Child-Find programs for hearing-impaired childen.

Major Outreach Services:
SCOOTER provides awareness activities; statewide Child-Find workshops; methods, materials and curriculum workshops; consultations; preservice and inservice training; and product development and distribution.

Features and Products:
Project SCOOTER coordinates a statewide High-Risk Register Program in 23 replication sites for the early detection of hearing loss. The project makes numerous presentations to professional organizations and develops audiovisual materials for public awareness and demonstration purposes. The project developed a Toddler Curriculum and other educational assessment instruments. SCOOTER is presenting a series of regional workshops on the identification of and intervention with hearing-impaired children.

Twenty-six sites are known to be using components of the demonstration model.

REGIONAL INTERVENTION PROGRAM EXPANSION PROJECT (RIP)

Address: 2400 White Avenue
Nashville, TN 37204

Phone: 615/269-5671
Year of Outreach Funding: 3

Fiscal Agency: RIP Advisory Committee, Inc.

Project Staff: Matthew A. Timm, Director; Sarah Rule, Coordinator
component directors, field coordinators, secretary, project evaluator

Source of Continuation Funding for Service Delivery Program:
Tennessee Department of Mental Health and Mental Retardation, Middle Tennessee Mental Health Institute

Description of Demonstration Model:
The RIP program is a parent-implemented service for preschoolers aged birth to five and their parents. Handicaps range from mild behavior disorders to severe developmental delays. Parents conduct intervention programs in both the clinic and the home. The project uses program-specific observational measures to determine child progress. After completing intervention with their children, parents participate in a time payback system to the program. The project operates on a management-by-objective basis at all levels.

Major Outreach Goals:
- To foster replication of the RIP model throughout the state and nation.
- To promote community awareness of the importance of early intervention in handicapping conditions through mass media and group instruction programs.
- To develop training programs for parents, professionals and paraprofessionals engaged in early intervention programs.

Major Outreach Services:
The project provides training and consultation in establishing RIP programs (one site established in 1980, two in progress). The project organizes and conducts community awareness campaigns on the importance of early intervention, legal rights of preschool handicapped children and available preschool services. Project-developed materials were field tested in three communities in 1979-80. In addition, the project provides preservice and inservice training to those serving handicapped children.

Features and Products:
RIP uses the Child Check Diary (film and public service announcements to stimulate interest in early intervention) and Using Skills Effectively and Using Resources Effectively (field-based training programs in early intervention techniques, including 14 training videotapes, manuals and a slide-tape production).

Thirteen sites are known to be using components of the demonstration model.

ADAPT PROJECT

Address: 910 East St. Johns Avenue
Austin, TX 78752

Phone: 512/453-5651
512/451-6539

Year of Outreach Funding: 1

Fiscal Agency: Austin Independent School District

Project Staff: Fred Tinnin, Director; Janice Lowry, Coordinator
two teacher/demonstrators

Source of Continuation Funding for Service Delivery Program:
Austin Independent School District and state foundation funds

Description of Demonstration Model:
ADAPT is a multifaceted process model curriculum for severely/profoundly multihandicapped children, offering a complete training and data collection system. The project features more than 900 objectives in five areas that have been task analyzed with generalization steps. The project conducts one- to two-day workshops with training media and provides follow-up visits.

Major Outreach Goals:
- To disseminate the ADAPT curriculum through training materials and media.
- To measure progress of severely/profoundly handicapped children aged birth to 9 years using a performance evaluation.
- To revise and update curriculum material to meet the needs of the preschool multihandicapped population.

Major Outreach Services:
The project conducts one- to two-day workshops with media and demonstration and offers follow-up visits. The project solicits inquiries through brochure mailings and journal articles and abstracts.

Features and Products:
ADAPT has consistently demonstrated significant improvement in rates of learning for students enrolled in the curriculum. ADAPT is easily adapted for different populations, such as deaf-blind or the orthopedically impaired. The ADAPT system is quickly learned by paraprofessionals or parents. It provides a common framework in which ancillary services (occupational and physical therapy, speech, nursing, psychology and counseling) can work efficiently.

Thirteen sites are known to be using components of the demonstration model.

PROJECT KIDS

Address: 3801 Hershell
Dallas, TX 75269

Phone: 214/526-0999
Year of Outreach Funding: 3

Fiscal Agency: Dallas Independent School District

Project Staff: Dr. Ruth Turner, Director; Ms. Ruth Wilson, Coordinator
disseminator, curriculum replication specialists (50%), parent replication spe- cialists (50%), evaluation replication specialists (50%), project consultants (20%)

Source of Continuation Funding for Service Delivery Program:
Local education agency

Description of Demonstration Model:
The program serves handicapped students aged birth to 5 years in a home-to-school transition model which serves children in the home, in centers and in public school classrooms. It uses a developmental-prescriptive approach and has a major family involvement component.

Major Outreach Goals:
- To replicate the program component of Project KIDS in all DISD preschool classroom sites (3-5 years).
- To replicate the program components of Project KIDS in at least five addi- tional sites in the area served by Educational Service Center, Region X.
- To conduct demonstration and information sharing activities to increase public awareness.
- To participate in the Triple T Consortium, a statewide organization for pro- jects which serve handicapped infants.
- To distribute Project KIDS dissemination packages to other programs, public and private schools and regional service centers to facilitate the development of quality programs.
- To develop a consortium of urban projects to share information and to address the critical issues unique to programs in urban settings.

Major Outreach Services:
Project KIDS coordinates activities of urban consortium and participates in state consortium. The project provies direct technical assistance in the areas of assessment, curriculum, evaluation and parent involvement to outreach sites in the region served by Education Service Center, Region X and training activities in cooperation with this agency. The project staff develops and disseminates a number of packages.

Features and Products:
The following products are available for distribution:
- Family Involvement Package
- Appraisal Package
- Evaluation Package
- Curriculum Package
- Staff Development Package

Strong features of the program are the highly individualized approach to the family and the program evaluation component.

Fifty-nine sites are known to be using components of the demonstration model.

DEBT PROJECT

Address: 1628 19th Street
Lubbock, TX 79401

Phone: 806/747-2641 ext. 455
Year of Outreach Funding: 4

Fiscal Agency: Lubbock Independent School District

Project Staff: Gloria Galey, Coordinator
outreach consultant, teacher trainer, secretary

Source of Continuation Funding for Service Delivery Program:
Lubbock Independent School District

Description of Demonstration Model:
The DEBT Project provides a home training program for children with developmental delays and their parents. The parents or guardian of the child must give consent for program participation. The following screening procedure is used: informal observation in the home which includes case history data; assessment of development levels using the Vineland Scale of Social Maturity, Denver, Koontz, REEL, etc.; and a medical evaluation by the child's private physician or the DEBT pediatric consultant. The project identifies as many young children as possible; provides medical evaluations for referred children; develops a home instructional program for parents; and develops awareness of services offered by state and community agencies. In addition, the project provides play and water programs twice weekly, parenting resource programs and follow-up services for teenage parents, and preservice and inservice training for staff and volunteers. Other activities include a volunteer program, assistance to day care centers, and local, regional and national information dissemination.

Major Outreach Goals:
- To train volunteers, professionals and paraprofessionals serving handicapped infants.
- To conduct an awareness campaign with state decision makers to allocate funds for infants aged birth to 2.
- To disseminate DEBT Project model information and system and DEBT training materials.

Major Outreach Services:
The project provides preservice and inservice training for those in health, education and social services. It also provides ongoing consultation to replication sites and a referral system to families in rural areas. The project staff conducts training sessions with medical students and pediatric residents at Texas Tech Medical School.

Features and Products:
Optional components of the DEBT model include a Water Play Program, Stay and Stitch Activities, a Saturday Morning Workshop for Men and a Parent Study Group. DEBT's research document detailing child progress data and parent involvement is available. Other products include: DEBT Diaper Dudes, DEBT Developmental Scale from Birth to Six Years, DEBT Teaching Activities Packet Birth to 36 Months, Comprehensive Training Notebook, DEBT GOSPEL Guidebook, DEBT Model Project (brochure), DEBT Outreach Project (brochure), Love Your Baby, and a bibliography of literature on child growth and development, intervention techniques and parental communications.

Twenty-four sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

PEECH OUTREACH

Address: 301 Loop 11
Wichita Falls, TX 76310

Phone: 817/322-6928
Year of Outreach Funding: 5

Fiscal Agency: Region IX Education Service Center

Project Staff: Lois A. Cadman, Director; Sally Eads, Coordinator training assistant

Source of Continuation Funding for Service Delivery Program:
Special Education Programs of the Region IX Schools and Preschool Incentive Grant

Description of Demonstration Model:
The project is a home-based model providing weekly home visits by professional and paraprofessional home teachers. The staff trains parents to conduct learning activities on a daily basis.

Major Outreach Goals:
- To present the PEECH Model to target agency participants
- To provide training and onsite consultative assistance to staff in a minimum of ten replication sites
- To provide inservice training and ongoing consultative assistance to the demonstration sites within the Region IX Education Service Center area
- To disseminate information and evaluate the program

Major Outreach Services:
The PEECH Outreach Program provides technical assistance to sites replicating components of the PEECH Model and teacher training in the areas of: identification of the population to be served; provision of the referral process in respect to P. L. 94-142; the assessment process; writing the IEPs; the home teaching process; parent training; and the coordination and utilization of supplementary services. The project emphasizes training teachers to train parents to continue the individualized educational program activities of the mild to severely handicapped on a daily basis in the home.

Features and Products:
PEECH Outreach trains parents to function as paraprofessional educators. The model is particularly adaptable for projects in rural areas. Dissemination products include Teacher's Handbook for developing home intervention programs and Parent's Handbook, which describes handicapping conditions and educational activities.

Forty-eight sites are known to be using components of the demonstration model.

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MULTI-AGENCY PROJECT FOR PRESCHOOLERS

Address: UMC 68
Utah State University
Logan, UT 84322

Phone: 801/750-2000
Year of Outreach Funding: 4

Fiscal Agency: Exceptional Child Center, Utah State University

Project Staff: Glendon Casto, Director; Debra Tolfa, Coordinator
rehabilitation physical therapist, occupational therapist, dissemination coordinator

Source of Continuation Funding for Service Delivery Program:
Title XX

Description of Demonstration Model:
The project is a home- and community-based intervention program serving handicapped children aged birth to 5 years in rural and remote areas where professionals trained to work with handicapped children are often lacking. The program teaches parents of children aged birth to 3 to act as intervention agents for their handicapped children by providing a specific curriculum, training and weekly monitoring. For handicapped children aged 3 to 5, the program provides curriculum materials and training to parents and teachers in preschools and community daycare.

Major Outreach Goals:
- To develop and disseminate products
- To stimulate site replication
- To train rural service providers

Major Outreach Services:
The project provides curriculum materials and training for the birth to 5 population in the areas of receptive and expressive languages, self-help, motor and social/emotional. The project also provides technical assistance in program evaluation.

Features and Products:
The project staff administers standardized and criterion-referenced pre and posttests, including the Bayley Scales of Infant Development, the Peabody Picture Vocabulary Test, the Assessment of Children's Language Comprehension, and the Visual Motor Integration Scale. Criterion measures developed by the project are also used. Results from these assessments showed significant child gains over a 9-month period. The project has developed curriculum materials and criterion tests in five developmental areas; these are available for dissemination.

Twenty-five sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

PROJECT SKI*HI OUTREACH

Address: Dept. of Communication Disorders
UMC 10
Logan, UT 84322

Phone: 801/750-1369
Year of Outreach Funding: 6

Fiscal Agency: Utah State University

Project Staff: Thomas C. Clark, Director; Susan Watkins, Coordinator
product development specialist, information disseminator, technical assistance trainer

Source of Continuation Funding for Service Delivery Program:
State of Utah legislative appropriation through the Utah School for the Deaf.

Description of Demonstration Model:
The administration component includes child identification and processing and program management. The project provides direct services to hearing impaired children, birth to 6, and their families. These services include home visits, curriculum teaching, hearing aid management, and auditory, communicative and language skills training. Support services include audiological, psychological and materials support.

Major Outreach Goals:
- To assist educational agencies in providing high quality home intervention services for presently unserved preschool hearing impaired children.
- To assist educational agencies in improving services for those children pre- sently receiving services.

Major Outreach Services:
The project offers awareness activities, dissemination conferences, develop- ment of curricular materials, training, information dissemination, on-site technical assistance and program evaluation through a nationwide data bank.

Features and Products:
The project recently developed a new format for delivering basic training to professionals implementing the direct services component of the model. It consists of a series of three 3-day on-site workshops covering the curriculum and program management. The traditional 3-week basic program held at Utah State University will continue for those needing training in the entire model, including early identification, public awareness, hearing aid services and psychological support services. The program has developed and made available a curriculum manual, eight slide-tape programs, two flip charts to help illustrate lessons to parents, two language assessment instruments, two videotaped training packages and a series of monographs on subjects relating to programming for young hearing impaired children and their families.

Fifty-two sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981.

EDUCATION FOR MULTIHANDICAPPED INFANTS (EMI-IMPACT)

Address: University of Virginia Medical Center
Box 232
Charlottesville, VA 22908

Phone: 804/924-5161
Year of Outreach Funding: 5

Fiscal Agency: University of Virginia Medical Center

Project Staff: Wanda B. Elder, Director; Susan N. Hastings, Associate Director
resource coordinator, medical consultant, secretary

Source of Continuation Funding for Service Delivery Program:
Hospital Education

Description of Demonstration Model:
The project provides a clinic- and home-based program to physically handicapped and developmentally delayed infants who are first seen in the Neonatal Intensive Care Unit Program. Project staff see the infant and parents individually three times a month at the center and once a month at home. The project assesses children bimonthly using the EMI Scale and videotape. The eclectic EMI Curriculum emphasizes Piagetian principles and contingent reinforcement.

Major Outreach Goals:
- To provide training and technical assistance to medical, educational and other personnel serving handicapped infants and their families in high-risk nursery or follow-up programs.
- To assist new and existing infant programs through the Virginia Infant Programs Consortium and the Virginia Association of First Chance Projects.
- To develop and disseminate EMI products.

Major Outreach Services:
The project provides training, networking and resource sharing and develops and disseminates products.

Features and Products:
Project-developed materials include:
- the EMI Assessment Scale (birth to 24 months)
- the EMI Curriculum
- Nursery Intervention Manual
- the EMI Infant Learning Packets and materials
- bibliographies

Twelve sites are known to be using components of the demonstration model.

CHILD DEVELOPMENT RESOURCES OUTREACH PROJECT (CDR)

Address: P. O. Box 299
Lightfoot, VA 23090

Phone: 804/565-0303
Year of Outreach Funding: 3

Fiscal Agency: Child Development Resources

Project Staff: Barbara Acree Kniest, Director; Sharon E. Kiefer, Coordinator administrative assistant, one full-time and one half-time trainers

Source of Continuation Funding for Service Delivery Program:
The CDR Infant Program is funded by the State Department of Mental Health and Mental Retardation, United Fund, public schools, local taxes and private contributions. Public schools fund and operate preschool classrooms.

Description of Demonstration Model:
The rural-based project offers interdisciplinary programming for handicapped and developmentally disabled children birth to 2 years using the parent as the primary teacher. The project assesses child progress every four months. Case managers, chosen from an educational team, conduct weekly home visits to help parents teach children the skills included in the IEP. Parent group meetings provide information about child development, management and advocacy. The project provides developmental day care for handicapped children and their siblings during parent meetings. The model is readily adaptable to a center-based setting.

Major Outreach Goals:
- To increase quality services to handicapped and developmentally disabled infants aged birth to 2 years and their families through replication of model components.
- To coordinate CDR Outreach Project activities with those state agencies responsible for the education and treatment of young handicapped children.
- To maintain and increase local awareness, support and funding.

Major Outreach Services:
The project's primary service is to provide training and technical assistance to those agencies wishing to replicate components of the CDR Infant Program. The project gives priority to agencies in rural settings. The project also develops and disseminates products and information.

Features and Products:
The project established and trained five replication sites during 1980. Three sites received training to replicate the CDR Infant Program. Two additional sites received training to replicate child-find activities. CDR products are distributed to 47 states and three foreign countries. CDR plays a leadership role in the consortium of Virginia BEH projects. Materials available include:
- Skills Inventory for Parents: a system for taking an inventory of parenting skills
- Skills Inventory for Teachers: staff development needs of home-based teachers
- Parent Group Curriculum
- Teaching Activities for Parents: activities for parents of chidren aged birth to 2 years

Ten sites are known to be using components of the demonstration model.

NORFOLK EARLY EDUCATION FOR HANDICAPPED CHILDREN (INDIVIDUALS-IN-GROUPS)

Address: Norfolk Project
Center for Excellence
Old Dominion University
Norfolk, VA 23508

Phone: 804/467-8312
Year of Outreach Funding: 3

Fiscal Agency: Old Dominion University Research Foundation

Project Staff: Marge Rae and Judith Schapiro, Co-Directors; Yolande Johhson-Spinnato, Coordinator; part-time secretary, illustrator, student assistant

Source of Continuation Funding for Service Delivery Program:
State Department of Mental Health and Mental Retardation

Description of Demonstration Model:
The project features two demonstration classrooms. The first serves children aged 2 to 5 years with moderate to severe handicaps; the second, a residential facility, serves children aged 4 to 8 years with severe handicaps. Both programs implement the Individuals-In-Groups curriculum with an emphasis on task analysis and direct measurement of child progress. The project uses precision teaching techniques and writes monthly summaries that give inter- and intrachild growth comparisons.

Major Outreach Goals:
- To train educators to implement the Individuals-In-Groups service delivery model.
- To develop and disseminate products to assist in replicating the classroom model.
- To provide awareness activities to focus on the importance of early intervention.

Major Outreach Services:
The project provides training in a data-based preschool classroom model which integrates one-to-one teaching programs in group activities through unit/themes. The project provides training in the areas of: 1) assessment, using the Individuals-In-Groups assessment kit based on performance rate measures of 83 behaviors; 2) curriculum, based on the premise that a provider can serve handicapped children with normative classroom activities while meeting individual needs; 3) evaluation, a nondiscriminatory monitoring system based on learning as opposed to performance; and 4) a model for outreach provided through direct training of service personnel at project demonstration sites in southeastern Virginia.

Features and Products:
Materials available include:
- the Individuals-In-Groups assessment kit
- a set of seven theme-centered curriculum books
- a parent manual
- manuals and slide/sound presentations on assessment, curriculum and evaluation

Twenty-one sites are known to be using components of the demonstration model.

A MODEL PRESCHOOL CENTER FOR HANDICAPPED CHILDREN OUTREACH PROJECT

Address: Experimental Education Unit WJ-10
Child Development and
Mental Retardation Center
Seattle, WA 98195

Phone: 206/543-4011
Year of Outreach Funding: 9

Fiscal Agency: University of Washington
Several local education agencies in King County

Project Staff: Rebecca F. DuBose, Director/Coordinator
two coordinators, four field trainers, dissemination specialist, secretary

Source of Continuation Funding for Service Delivery Program:
University of Washington and several local education agencies in King County.

Description of Demonstration Model:
At the Alice H. Hayden Preschool Program, approximately 200 children aged birth to 6 years with a variety of handicaps receive educational and related services to help them maximize their skills. Parents receive training and other assistance as well.

Major Outreach Goals:
- To provide training and other assistance to programs in the Northwest.
- To prepare and provide materials to programs and individuals.
- To promote awareness and stimulate improved services.

Major Outreach Services:
The project offers field-based and center-based training, technical assistance, instructional and informational materials and follow-up assistance as requested.

Features and Products:
The program has demonstrated effectiveness in working with communication-delayed children and those with Down's syndrome and other developmental delays. Parent involvement techniques are particularly useful in maximizing child gains, as parents and other members of the interdisciplinary team coordinate efforts both at home and at school on behalf of the pupils.

Twenty sites are known to be using components of the demonstration model.

JDRP-APPROVED AS OF JANUARY 1, 1981

THE PORTAGE PROJECT

Address: 413 East Slifer Street
Box 564
Portage, WI 53901

Phone: 608/742-5342
Year of Outreach Funding: 8

Fiscal Agency: Cooperative Educational Service Agency #12

Project Staff: David E. Shearer, Director; Neal Schortinghuis, Coordinator
two training specialists, evaluation coordinator

Source of Continuation Funding for Service Delivery Program:
Twenty-three local school districts in south-central Wisconsin in cooperation with the Wisconsin Department of Public Instruction.

Description of Demonstration Model:
The project follows a precision teaching model which focuses on effective parent involvement to facilitate long-term early childhood intervention. The program provides a home teacher weekly to aid parents in assessing the child's present skill level in five developmental areas, in targeting emerging skills, in developing skills necessary to teach the child, in defining appropriate teaching techniques, and in evaluating the child's performance.

Major Outreach Goals:
- To facilitate awareness
- To stimulate services
- To development materials
- To train
- To provide technical assistance to replication sites
- To evaluate outreach activities

Major Outreach Services:
The Portage Project offers replication and demonstration site training, awareness workshops and materials, and conference presentations. In addition, the project provides technical assistance to home-based programs.

Features and Products:
A new aspect of the project is the Portage Parent Program, a systematic parent-training component to improve parental skills in the teaching and child-management domains. The component includes a Parental Behavior Inventory, Parent Readings, and an Instructors Manual. Also available is the Portage Guide to Early Education (Spanish and English).

Fifty-three sites are known to be using components of the demonstration model.

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THE COMPREHENSIVE TRAINING PROGRAM FOR INFANT AND YOUNG CEREBRAL PALSIED CHILDREN

Address: 9001 W. Watertown Plank Road
Wauwatosa, WI 53226

Phone: 414/259-1414
Year of Outreach Funding: 8

Fiscal Agency: Curative Rehabilitation Center

Project Staff: Rona Alexander, Director
assistant project director, audiovisual program specialist, typist

Source of Continuation Funding for Service Delivery Program:
Federal and state funding, insurance and private patient fees

Description of Demonstration Model:
The project serves children aged birth to 3 with neuromotor involvement resulting in feeding, speech and/or language problems. Services include speech and occupational therapy, nutrition, psychology, special education, and social and medical services. Pre/posttest data are analyzed using the Bzoch-League REEL Scale, Mecham Verbal Language and Development Scale, and Peabody Picture Vocabulary Test.

Major Outreach Goals:
- To train teams of staff from replicating agencies in 6-day Fundamental Guidelines Workshops.
- To train the speech pathologist of each team in the Pre-Speech Assessment Scale.
- To present lectures and workshops on a national basis, emphasizing the need for early intervention and programming for handicapped children.
- To develop and revise materials in nutrition, pre-speech and feeding, and pre-linguistics/cognition.

Major Outreach Services:
The project trains teams from replicating agencies in 6-day Fundamental Guidelines Workshops and trains speech pathologists in the Pre-Speech Assessment Scale. The project staff makes a site visit to all new replication sites. In addi- tion, the project makes available new materials to new and previously trained sites in pre-speech/feeding, nutrition and pre-linguistics/cognition.

Seventy-nine sites are known to be using components of the demonstration model.

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PROJECT WISP/OUTREACH

Address: P. O. Box 3224
University Station
Laramie, WY 82071

Phone: 307/766-6145
Year of Outreach Funding: 2

Fiscal Agency: University of Wyoming

Project Staff: Janis A. Jelinek, Director; Thomas C. Flamboe, Coordinator training coordinator, parent coordinator

Source of Continuation Funding for Service Delivery Program:
Laramie Association for Retarded Citizens

Description of Demonstration Model:
WISP provides a comprehensive preschool program using both center-based and home-based intervention. The project serves handicapped infants and toddlers and their families residing in Albany County, Wyoming, a significantly rural area. The basic intervention model is developmental-prescriptive. The major measure of child progress is E-LAP; other measures are used as necessary.

Major Outreach Goals:
- To disseminate awareness materials and/or conduct short-term awareness sessions focusing on the WISP model and the need for early intervention.
- To provide training and technical assistance to selected replication sites.
- To provide training in model components to parents, professionals, community groups and college/university students.
- To develop and disseminate products.

Major Outreach Services:
The project provides training and technical assistance to programs in Wyoming and other states wishing to replicate components of the model. In addition, the project researches materials and topics according to expressed needs and makes this information available to individuals and agencies. The major emphasis during FY 81 has been short-term training/awareness activities for professionals, parents and community groups.

Features and Products:
The project maintains a toy-lending library which is available to parents and other programs. The project offers free developmental screenings to any child aged birth to 3 in Albany County. During FY 80, the staff trained 80 individuals at 14 replication sites (197 handicapped children received new or improved services as a result of these activities), conducted 10 mass media and 60 formal awareness activities, developed four new products, and provided competency-based training to 287 individuals. Eight products are available for dissemination.

Fifteen sites are known to be using components of the demonstration model.

ALABAMA

SIG Director: William C. Ward **Phone:** 205/832-3890

SIG Coordinator: Nell G. Kilpatrick **Phone:** 205/832-3890

State Director of Special Education: Patricia McLaney

SIG Mailing Address: Early Childhood Unit
111 Coliseum Boulevard
Montgomery, AL 36193

Periods of SIG Funding: 1979-1981

State Legislation for Special Education Services:
Mandated: aged 6 to 21 years

Major SIG Objectives and Purposes for 1980-1981:
- To provide training to educators to equip them with the necessary understanding, skills and techniques to serve effectively young handicapped children in Alabama.

Features and Products:
The following materials are available:
- Instructional Resource Guide: Serving the Young Child More Effectively: a manual of instructional resources such as films, printed materials, assessment instruments and directories of organizations and agencies.
- Needs Assessment Report: a report on a conference for assessing needs in providing services to young handicapped children; the report also presents the results and processes of the needs assessment design used.
- HCEEP Inservice Model: a staff development design that incorporates the basic elements (needs assessment, decision making, process, modes, delivery and evaluation) of inservice in strategies to accommodate professional and personal growth.

ARIZONA

SIG Director:	Lillian Reed	**Phone:** 602/255-3183
SIG Coordinator:	Diane Renne	**Phone:** 602/255-3183
State Director of Special Education:	Diane Petersen	**Phone:** 602/255-3183
SIG Mailing Address:	Special Education Arizona Department of Education 1535 West Jefferson Phoenix, AZ 85007	

Periods of SIG Funding: 1980-81

State Legislation for Special Education Services:
Mandated: 5 through 21 years
Permissive: None

Major SIG Objectives and Purposes for 1980-1981:
- To assess service capabilities and needs of existing preschool programs for handicapped children.
- To assess training and technical assistance needs of preschool special education programs, with special emphasis on rural and remote areas of the state.
- To survey agencies which provide screening, assessment and referral services to handicapped preschool children to determine duplications and gaps in services.
- To develop a guide for monitoring preschool special education programs.
- To establish a consortium for planning statewide training and technical assistance.
- To assist LEAs in developing plans to serve preschool handicapped children.

Features and Products:
Staff hiring procedures delayed SIG activities. An interagency task force has met twice to review and revise a draft of proposed standards and guidelines for preschool special education programs. The task force is also assisting the SIG coordinator in developing an agency survey to identify duplications and gaps in screening, evaluation and referral services.

CALIFORNIA

SIG Director: Nancy N. Obley **Phone:** 916/322-5038

State Director of Special Education: Gordon Duck **Phone:** 916/323-4768

SIG Mailing Address: Office of Special Education
721 Capitol Mall
Sacramento, CA 95814

Periods of SIG Funding: 1978-81

State Legislation for Special Education Services:

Mandated: 3 years for Developmental Center handicapped (severely/profoundly handicapped), 3 years for those "requiring intensive special education and services" in phase-in to be statewide by September 1981.

Permissive: birth to 3 years, to be statewide by September 1981 for those "requiring intensive special education and services"

Major SIG Objectives and Purposes for 1980-1981:

- To conduct comprehensive statewide planning for special education and related services for infant and preschool aged individuals with exceptional needs and their families.
- To develop a statewide plan.
- To develop interagency agreements.
- To develop a consortium model.
- To develop and implement a SIG evaluation.

Features and Products:

The California SIG has developed an intra-department plan to maximize utilization of all existing service programs for young handicapped children operated by the Department of Education. In addition, the SIG has established criteria for teacher accreditation and developed a Needs Assessment Instrument for training and technical assistance needs. There are two workshops developed and offered by the SIG: 1) Establishing Programs for Handicapped Preschool Children, and 2) Mainstreaming Young Handicapped Children. The print materials developed by the SIG include: Guidelines for Providing Services to Infant and Preschool Individuals with Exceptional Needs, Interstate Conference on Consortium Development, Selected Programs Serving Handicapped Infants and Preschool Children: A Compendium of Program Descriptions for California Educators, and Early Warning Signs, a child-find brochure.

CONNECTICUT

SIG Director:	Virginia Guldager	**Phone:** 203/566-2283
SIG Coordinator:	Judy Hasty Larson	**Phone:** 203/566-3826
State Director of Special Education:	Tom B. Gillung	**Phone:** 203/566-4383
SIG Mailing Address:	State Department of Education Bureau of School and Program Development P. O. Box 2219, 165 Capitol Avenue Hartford, CT 06115	
Periods of SIG Funding:	1978-1981	

State Legislation for Special Education:

Mandated: aged 3 years by January 1 of the school year
Permissive: birth to 3 years

Major SIG Objectives and Purposes for 1980-1981:

- To continue to convene and support the statewide Interagency Early Intervention Committee, including all agencies providing services to young handicapped children.
- To complete the assessment of fiscal and personnel resources of agencies providing services to preschool children with special needs.
- To develop a state plan for the coordination and collaboration of existing resources and services, including specific action plans for participating agencies.
- To monitor and evaluate the plan in two selected regions of the state.

Features and Products:

The SIG assisted in the implementation and ongoing operation of three pilot sites to demonstrate interagency cooperative efforts. Negotiations with state agencies regarding the delivery of comprehensive services to preschoolers with special needs resulted in a service agreement with the State Department of Health Services. The SIG provided training and technical assistance to preschool service providers and local education agencies through the Early Childhood Special Education Networks. The SIG stimulated three pilot sites demonstrating interagency collaboration at the local level, increased health education collaboration for preschool special education and initiation of a state interagency committee seeking to increase cross agency cooperation and service delivery.

DISTRICT OF COLUMBIA

SIG Director:	Ann Palmore	**Phone:** 202/724-2141
SIG Coordinator:	Ann Palmore	**Phone:** 202/724-2141
State Director of Special Education:	Doris A. Woodson	**Phone:** 202/724-4018
SIG Mailing Address:	D.C. Public Schools Webster Building 10th and H Streets Washington, DC 20001	
Periods of SIG Funding:	1980-1981	

State Legislation for Special Education Services:
Mandated: 4 to 21 years

Major SIG Objectives and Purposes for 1980-1981:
- To cooperate and collaborate with a wide range of local agencies and groups to prepare a comprehensive plan for delivery of services to preschool handicapped children aged 3 to 5 years in the District of Columbia.

Features and Products:
The SIG is currently developing products that will address two areas: standards and guidelines for comprehensive delivery of services to preschool handicapped children aged 3 to 5 years, and a survey of existing programs and services for handicapped preschoolers. A task force made up of five committees is studying issues concerning legislation.

GEORGIA

SIG Director:	Alan E. White (acting)	**Phone:** 404/656-6319
SIG Coordinator:	Alan E. White	**Phone:** 404/656-6319
State Director of Special Education:	A. E. Bilyeau	**Phone:** 404/656-2425
SIG Mailing Address:	Georgia State Department of Education Program for Exceptional Children State Office Building Atlanta, GA 30334	
Periods of SIG Funding:	1979-1981	

State Legislation for Special Education Services:
Mandated: 5 to 18 years
Permissive: birth to 4 years and 19 to 21 years

Major SIG Objectives and Purposes for 1980-1981:
- To increase technical assistance and program expansion.
- To provide data collection and analysis for appropriate local and state interagency planning.
- To increase media and public awareness development.
- To establish new components for joint screening and support programs.
- To develop an early childhood services directory.
- To promote affiliation agreements.

Features and Products:
The Georgia SIG has developed the Georgia Parent-Infant Network for Educational Services for Hearing Impaired, a brochure. Interagency Planning Forum, a NASDSE report, is also available for dissemination. The SIG will produce an affiliation agreement with Head Start and the brochure Preschool Information.

KANSAS

SIG Director:	Phyllis Ellis	**Phone:** 913/296-3866
SIG Coordinator:	Lucile Poden	**Phone:** 913/296-3866
State Director of Special Education:	James E. Marshall	**Phone:** 913/296-3866
SIG Mailing Address:	Special Education Administration Section Kansas State Department of Education 120 East 10th Street Topeka, KS 66612	
Periods of SIG Funding:	1977-81	

State Legislation for Special Education Services:
Mandated: "school age" (5-years-old before September 1) to 21 years
Permissive: birth to "school age"

Major SIG Objectives and Purposes for 1980-1981:
- To promote early educational intervention for young handicapped children through an ongoing planning process.
- To develop and implement a long-range comprehensive state plan for services across agency lines.
- To address the immediate administrative, expansion and personal needs of individual service agencies.

Features and Products:
The Kansas SIG has initiated a state Interagency Coordination Committee formed of representatives from state agencies, advocacy organizations and professional groups assisting preschool handicapped children. The Committee has established priority work areas and formed task forces to address major areas of concern. The emphasis is to develop and implement cooperatively a long-range comprehensive state plan for serving young handicapped children. Forty-four ECH programs provide services to 1,200 children through public schools and other public and private programs meeting Kansas program approval standards.

Available materials include:
- Whispers: a slide-tape program addressing public awareness, need, rationale and inter-agency approach
- Road Blocks: a slide-tape program presenting responses to common questions regarding interagency services
- Early Childhood Program Standards from the Kansas State Plan for Special Education
- ECH Teacher Certification Requirements (proposed)
- Puzzled About Handicapped Preschoolers: a brochure describing the rationale and need for early intervention

LOUISIANA

SIG Director:	Henry Smith	**Phone:** 504/342-3631
SIG Coordinator:	Daphne Thomas	**Phone:** 504/342-1641
State Director of Special Education:	Henry Smith	**Phone:** 504/342-3633
SIG Mailing Address:	1272 Laurel Street Baton Rouge, LA 70802	
Periods of SIG Funding:	1977-1981	

State Legislation for Special Education Services:
Mandated: 3 to 5 years
Permissive: birth to 2 years (to be mandated by 1985)

Major SIG Objectives and Purposes for 1980-1981:
- To develop a common report form for medical assessments conducted by the Handicapped Children's Early Education Program as part of an LEA multidisciplinary evaluation for determining special education services.
- To implement cooperative planning activities between the Office of Family Security and the State Department of Education.

Features and Products:
The SIG seeks to minimize incidences of handicapping conditions through the early identification of high risk infants and early intervention. The project provides information and referral services, personnel training, parent education and parent counseling. The project will also improve methods of identifying children aged 3 to 5 years with previously diagnosed or undiagnosed handicaps. The SIG collaborates with Maternal/Child Health Programs, Early Periodic Screening and Diagnostic Testing (EPSDT) and the Handicapped Children's Services Program to improve the level of health care to handicapped children. The same collaborative functioning occurs within education through the Division of Special Educational Services.

MAINE

SIG Director:	Christine B. Bartlett	**Phone:** 207/289-3451
SIG Coordinator:	Christine B. Bartlett	**Phone:** 207/289-3451
State Director of Special Education:	David N. Stockford	**Phone:** 207/289-3451
SIG Mailing Address:	MDECS Division of Special Education State House Station #23 Augusta, ME 04333	
Periods of SIG Funding:	1977-1981	

State Legislation for Special Education Services:

Mandated: 5 to 20 years

Permissive: birth to 5 years for hearing and language impaired children; grant program for coordination of services and planning for new service development for children aged 3 to 5 years

Major SIG Objectives and Purposes for 1980-1981:

- To continue the University Consortium responsible for developing a degree program in Early Childhood/Special Education within the state university system.
- To develop program standards and guidelines for all programs and services for handicapped children aged birth to 5 in Maine.
- To develop specific written agreements at the state level to facilitate service delivery to handicapped children aged birth to 5 in Maine.

Features and Products:

The SIG expects to complete several products at the end of 1982. These include specific interagency agreements at the state level, teacher certification standards for early childhood/special education and program standards and guidelines for services to children aged birth to 5 years. The SIG offers assistance in organizing state and local interagency efforts, providing statewide inservice and parent training based on local needs, preparing legislation and designing evaluations of an interagency coordination effort.

MARYLAND

SIG Director:	Lin Leslie	**Phone:** 301/659-2536
SIG Coordinator:	Kate Kressley	**Phone:** 301/659-2536
State Director of Special Education:	Martha J. Irvin	**Phone:** 301/659-2489
SIG Mailing Address:	Division of Special Education Maryland State Department of Education 200 West Baltimore Street Baltimore, MD 21201	
Periods of SIG Funding:	1980-1981	

State Legislation for Special Education Services:
Mandated: birth to 21 years

Major SIG Objectives and Purposes for 1980-1981:
- To create an interdisciplinary consultant group to examine issues related to delivery of services for handicapped children aged birth to 3 years.
- To develop strategies for planning interagency service needs.
- To assess technical assistance needs for 24 Maryland local school systems serving handicapped infants and their families.
- To design a system for meeting technical assistance requests.

Features and Products:
In a final report, the SIG will detail the process used to accomplish the above objectives. Achievements made during FY-81 will support the long-term goal of developing a comprehensive plan for educating handicapped children aged birth to 5 years. Interagency representatives will draft state guidelines and standards for comprehensive services for handicapped children aged birth to 3 years. Guidelines will address the areas of screening, assessment, intervention, personnel preparation, evaluation and parent involvement in intervention. The SIG will also assist LEAs in planning services for young handicapped children. The Maryland State Department of Education's Resource Manual: Handicapped Children Birth to Five will serve as a reference.

MASSACHUSETTS

SIG Director:	Ann B. Taylor	**Phone:** 617/727-5770
SIG Coordinator:	Lee-Ann L. Day	**Phone:** 617/727-5770
State Director of Special Education:	Roger W. Brown	**Phone:** 617/727-6217
SIG Mailing Address:	Early Childhood Project Division of Special Education 31 St. James Avenue, Sixth Floor Boston, MA 02116	
Periods of SIG Funding:	1977-1981	

State Legislation for Special Education Services:
Mandated: 3 to 21 years, noncategorical special education
Permissive: birth to 3 years

Major SIG Objectives and Purposes for 1980-1981:
- To complete the Interagency Planning Project.
- To develop six regional resource directories for children aged birth to 6 years with special needs.
- To develop shared interagency, regional inservice training calendars.
- To review and make recommendations concerning gaps in services to young children with special needs.

Features and Products:
The Massachusetts SIG has developed the following products:
- A Plan for Coordinated Interagency Services for Children with Special Needs in Massachusetts
- Case Studies of Developmental Screening Programs for Young Children
- Guide to Early Childhood Developmental Screening
- Mainstreaming through the Media: a kit of selected children's books, reference books and films to help adults guide children toward understanding people with special needs (resource list available)
- Guide to Developmental Assessments for Young Special Needs Children

The Regional Resource Directories of Service for Special Needs Children Ages 0-6 will be available in September 1981. The following project-developed products are available at the SIG office only:
- Manual for Development of Resource Directories
- Manual for Training Pediatricians in the Use of Directories
- Manual for Reviewing Client Pathway Systems/Services for Young Special Needs Children

MISSOURI

SIG Director:	Roland J. Werner, Jr.	**Phone:** 314/751-2965
SIG Coordinator:	Delores John, Supervisor Federal Programs	**Phone:** 314/751-4909
	Mildred Winter, Director Early Childhood	**Phone:** 314/751-2625
State Director of Special Education:	Roland J. Werner, Jr.	**Phone:** 314/751-2965
SIG Mailing Address:	Dept. of Elementary and Secondary Education P. O. Box 480 Jefferson City, MO 65102	
Periods of SIG Funding:	1980-81	

State Legislation for Special Education Services:

Mandated: 5 to 20 years
birth to 20 years for screening, evaluation and diagnosis
Permissive: birth to 4 years

Major SIG Objectives and Purposes for 1980-1981:

- To facilitate comprehensive, statewide, interagency planning for services to Missouri's early childhood handicapped population.
- To identify programs and resources available from state agencies providing services to the early childhood handicapped population.
- To update statewide program guidelines for preschool programs.
- To provide technical assistance to LEAs in dissemination activities.
- To establish a communication network.

Features and Products:

The Missouri SIG is still in the early development stage. Presently available are teacher certification standards and special education rules and regulations. The proposed products will include program guidelines, interagency cooperative planning agreements, an extensive resource guide and a newsletter.

MONTANA

SIG Director:	Paul W. Spoor	**Phone:** 406/449-5660
SIG Coordinator:	Paul W. Spoor	**Phone:** 406/449-5660
State Director of Special Education:	Shirley M. Miller	**Phone:** 406/449-5660
SIG Mailing Address:	Special Education Unit Office of Public Instruction State Capitol Helena, MT 59601	
Periods of SIG Funding:	1980-81	

State Legislation for Special Education Services:
Mandated: 6 to 18 years
Permissive: birth to 5 years, 18 to 21 years

Major SIG Objectives and Purposes for 1980-1981:
- To facilitate interagency coordination of services to handicapped children aged birth to 5 years.
- To develop guidelines for preschool programs and personnel.
- To collect and disseminate materials, products and information concerning preschool services and resources.
- To identify funding sources for preschool services.

Features and Products:
The Montana SIG is in its early development. So far the SIG has created a consortium for early childhood education.

NEVADA

SIG Director: Sharon Palmer **Phone:** 702/885-5700

State Director of Special Education: Frank South **Phone:** 702/885-5700

SIG Mailing Address: Nevada Department of Education
400 West King Street, Capitol Complex
Carson City, NV 89710

Periods of SIG Funding: 1979-1981

State Legislation for Special Education Services:
Permissive: Visually and aurally handicapped from birth
Mentally handicapped from 3 years

Major SIG Objectives and Purposes for 1980-1981:
- To coordinate existing services by improving interagency cooperation.
- To continue a public awareness campaign on current services.
- To increase parents' knowledge regarding early development and education.
- To develop a preschool component of the Comprehensive Personnel Preparation Plan.
- To serve as a resource and provide technical assistance to school districts.
- To develop a comprehensive, statewide, early childhood plan including standards and guidelines.

Features and Products:
The Early Childhood Totline is a successful component of the SIG, as callers respond to public service announcements stressing attention to child development and early intervention. The project disseminates a directory of services and materials on child development, the importance of early intervention and other topics.

NEW YORK

SIG Director: Lawrence Gloeckler **Phone:** 518/474-8917

SIG Coordinator: Michael Plotzker **Phone:** 518/474-2251

State Director of Special Education: Louis Grumet **Phone:** 518/474-5548

SIG Mailing Address:
New York State Education Department
Office for Education of Children
with Handicapping Conditions
Bureau of Program Development
Room 1061 - EBA
Albany, NY 12234

Periods of SIG Funding: 1976-1981

State Legislation for Special Education Services:
Mandated: birth to 3 years, 5 to 21 years
Permissive: none; parents may petition through family court for educational services for handicapped children aged birth to 5 years.

Major SIG Objectives and Purposes for 1980-1981:
- To assist in developing guidelines for the support of legislation for 3- and 4-year-old handicapped children in New York State.
- To develop a plan for early childhood education as part of the Annual State Plan.
- To develop state level agreements to fund Regional Early Childhood Direction Centers.
- To establish Regional Early Childhood Direction Center sites at the local level through cooperative agreements between Perinatal Clinics and Early Childhood Direction Centers.
- To assist Regional Early Childhood Direction Centers in linking handicapped infants and preschoolers to services.

Features and Products:
The SIG has established 19 Early Childhood Direction Centers to assist parents and professionals in matching services to the needs of young handicapped children. SIG staff provide technical assistance and support to this network of Early Childhood Direction Centers. The project provides inservice training to teachers and other personnel serving young handicapped children. It also developed and field tested "Early Identification and Referral of Handicapped Infants and Preschoolers," an accredited continuing medical education course for allied health personnel. In preparation for future activities, the SIG further developed the relationship between the Early Childhood Direction Centers and Regional Perinatal Centers. Through the Preschool Interagency Council and other mechanisms, the SIG identified state programs and services to young handicapped children and initiated collaboration among various agencies. During the past year, the SIG renegotiated and implemented the interagency agreement between the Disabled Children's Programs and the State Education Department to establish an Early Childhood Direction Center in a LEA and in a university-affiliated medical center.

NORTH CAROLINA

SIG Director:	Carolyn Perry	**Phone:** 919/733-3921
SIG Coordinator:	Mable Hardison	**Phone:** 919/733-3921
State Director of Special Education:	Theodore R. Drain	**Phone:** 919/733-3921
SIG Mailing Address:	Division for Exceptional Children State Department of Public Instruction Raleigh, NC 27611	
Periods of SIG Funding:	1976-1981	

State Legislation for Special Education Services:
Mandated: 5 to 17 years
Permissive: birth to 5 years

Major SIG Objectives and Purposes for 1980-1981:
- To establish a comprehensive plan for the coordination of services to handicapped children aged birth to 4 years, including the standardization of guidelines, regulatory procedures and service delivery options. The cooperative plan will allow children with varying degrees and types of handicaps to receive services in the environment that best suits their individual needs. In addition, a full range of services will be provided, and program administrators will have a systematic method of identifying gaps in services, personnel needs and funding requirements for program expansion.
- To develop teacher education standards and certification requirements for personnel working with preschool handicapped children.

Features and Products:
The SIG sponsored a two-day statewide training conference for local education agency, developmental day care and Head Start personnel. The conference focused on skill development in program planning, classroom management, basic skills curriculum and IEP development. The SIG has expertise in the development of training materials and conferences. Nineteen instructional programs are now operating in LEAs; an additional twelve screening projects were implemented last year. Although these programs and projects are funded through Preschool Incentive Grant monies, the SIG has provided state level staff to coordinate preschool services and to provide technical assistance to LEAs developing these programs. Products available through the SIG include:
- Getting Started: A Guide to Program Management Techniques
- Assess, Plan, Teach: IEP Development for the Preschool Handicapped Child
- Preschool Guidelines for Children with Special Needs
- Program Transition Procedures of the Young Exceptional Child (available Spring 1981)

OHIO

SIG Director:	Veronica Payer	**Phone:** 614/466-2650
SIG Coordinator:	Carol Quick	**Phone:** 419/666-5180
State Director of Special Education:	S. J. Bonham, Jr.	**Phone:** 614/466-2650
SIG Mailing Address:	Ohio Division of Special Education 933 High Street Worthington, OH 43085	
Periods of SIG Funding:	1979-1981	

State Legislation for Special Education Services:

Mandated: 5 to 21 years
Permissive: 3 to 4 years, educational program
birth to 2 years, parent counseling

Major SIG Objectives and Purposes for 1980-1981:

- To continue a communication network of local school districts and other agencies providing preschool services to share information and plan for comprehensive preschool services.
- To continue developing inservice training modules that will describe essential preschool components and implementation procedures for professional and paraprofessional early education staff.
- To develop and disseminate materials and information for educators, parents and general public to increase awareness of the needs of young handicapped children.
- To implement an ongoing information retrieval system to aid future planning decisions.

Features and Products:

The SIG has developed a Planning Guide for Statewide Early Childhood Service and Monitoring at the Local Education Agency Level. In addition, the project has implemented an interagency agreement with Head Start. Other products include procedures for obtaining retail business sector funds and inservice training materials.

OKLAHOMA

SIG Director:	Jo Ann Gordoni	**Phone:** 405/521-2920
SIG Coordinator:	Ron Pelt	**Phone:** 918/744-1881
Administrator:	Jimmy L. V. Prickett	**Phone:** 405/521-3351
SIG Mailing Address:	Oklahoma Dept. of Education 2500 N. Lincoln Boulevard Suite 2-63 Oklahoma City, OK 73105	
Periods of SIG Funding:	1979-81	

State Legislation for Special Education Services:

Mandated: birth to 4, severely handicapped
4 and above, all identified
Permissive: birth to 4, mildly and moderately handicapped

Major SIG Objectives and Purposes for 1980-1981:

- To promote community involvement and the formation of local groups to coordinate local services with the Regional Education Service Centers and state groups.
- To promote agreement on joint program development for low incidence handicapped at cluster locations.
- To continue exploration and development of birth certificate follow-up for high-risk handicapped and computerized tracking for identified handicapped.
- To clarify and administrat joint release of information to state public service agencies under the class-of-parties lause of the Family Rights and Privacy Act.
- To promote the development of timely parent involvement, "sharing centers" and interpersonal support systems.
- To promote the design of manuals to assist LEAs in appropriate referral and attachment of related services, data management and curriculum development.
- To promote the implementation of NDN-validated programs to become key training centers for new and existing programs.

Features and Products:

The Oklahoma SIG has organized a task force through the Governor's Mini-Cabinet on Human Resources, and it has held two statewide workshops for public agency representatives, regional education service center personnel and directors of special education from local education agencies. The SIG has identified three adoption sites for JDRP projects in the NDN and completed an interagency coordination survey and analysis worksheet. In addition, the need for direction center services for parents, programs for low incidence handicapped and the identification of and service to private programs have been isolated as the predominant service gaps in the state.

- Number of people trained: 166
- Sites stimulated: 15

SOUTH DAKOTA

SIG Director: Sharyl R. Gottschalk **Phone:** 605/773-3678

State Director of Special Education: George R. Levin **Phone:** 605/773-3678

Address: Section for Special Education
R. F. Kneip Office Building
Pierre, SD 57501

Periods of SIG Funding: 1977-81

State Legislation for Special Education Services:

Mandated: birth to 21 for children in need of prolonged assistance (severe and profound)
3 to 21 for children in need of special assistance (mild, moderate and gifted)

Major SIG Objectives and Purposes for 1980-1981:

- To coordinate administrative decisions and policies within the early childhood handicapped area between the SEA and the Bureau of Indian Affairs (BIA).
- To develop a plan for BIA schools initiating early childhood handicapped services.
- To identify local, regional and state resources that may be used by handicapped American Indian children.

Features and Products:

The South Dakota SIG has developed four state interagency agreements. An interagency referral system has been established in the southeastern part of the state. The SIG provides inservice training in early childhood and special education. New preschool handicapped programs have been initiated, and established programs have received technical assistance in continuing their programs. Materials developed by the SIG include: South Dakota Preschool Guidelines, South Dakota Preschool Curriculum, Parental Involvement Manual, South Dakota Special Education Administrative Handbook, and several brochures.

The SIG has initiated new early childhood programs in 40 school districts, expanded present early childhood programs in three school districts, established an interagency referral system in one area of the state and provided inservice training through the Association for Retarded Citizens.

U. S. VIRGIN ISLANDS

SIG Director:	Kathleen Dyer	**Phone:** 809/773-1095
SIG Coordinator:	Ellie Hirsh	**Phone:** 809/773-7997
State Director of Special Education:	Kathleen Dyer	**Phone:** 809/773-1095
SIG Mailing Address:	Department of Education Learning Resource Center P. O. Box I Christiansted, St. Croix VI 00820	
Periods of SIG Funding:	1979-1981	

State Legislation for Special Education Services:
Mandated: 3 to 21 years

Major SIG Objectives and Purposes for 1980-1981:
- To identify needs and develop plans for comprehensive and related services to young handicapped children through interagency coordination.
- To provide training to those who serve or will potentially serve preschool handicapped children.

Features and Products:
The SIG has developed two training needs assessments: one for service providers in public and private agencies and one for parents of young handicapped children.

VIRGINIA

SIG Director: M. Jo Bunce **Phone:** 804/786-2673

SIG Coordinator: Mary Elsesser **Phone:** 804/786-2673

State Director of Special Education: James T. Micklem **Phone:** 804/786-2681

SIG Mailing Address: Division of Special Education and Pupil Services
Department of Education
P.O. Box 6Q
Richmond, VA 23216

Periods of SIG Funding: 1978-1981

State Legislation for Special Education Services:
Mandated: 2 to 21 years
Permissive: birth to 2 years

Major SIG Objectives and Purposes for 1980-1981:
- To use three local community sites to identify standards and strategies for delivering comprehensive services to handicapped children aged birth to 5 years.
- To formulate a state interagency early childhood task force to revise the current early childhood state plan based on the results of the local community sites.

Features and Products:
The following products are available from the SIG: Preschool Handicapped Services: An Evaluation of the Virginia Department of Education, Certification Regulations for Preschool Teachers of the Handicapped, and Technical Assistance Centers for Preschool Teachers of the Handicapped: An Overview.

WASHINGTON

SIG Director: Linda Espinosa **Phone:** 206/753-0317

SIG Coordinator: Linda Espinosa **Phone:** 206/753-0317

State Director of Special Education: **Phone:** 206/753-6733

SIG Mailing Address: Early Childhood Coordinator
Superintendent of Public Instruction
Division of Special Services
Old Capitol Building - FG-11
Olympia, WA 98504

Periods of SIG Funding: 1976-1981

State Legislation for Special Education Services:
Mandated: 5 to 21
Permissive: birth to 4

Major SIG Objectives and Purposes for 1980-1981:
- To develop a comprehensive state plan for the delivery of services to handicapped children aged birth to 5 years.
- To establish two Regional Interagency Centers to facilitate the development of local interagency agreements.
- To adopt the Preschool Program Guidelines statewide.
- To replicate and refine model Childfind procedures.

Features and Products:
The project developed the following materials: Assessment Manual, Childfind Manual and Update, Preschool Program Guidelines, Guidelines for Home-based Programs, Interagency Coordination Guidelines, and With Head Start.

WEST VIRGINIA

SIG Director: Keith Smith **Phone:** 304/348-2034

SIG Coordinator: Nancy Vorobey **Phone:** 304/348-8830

State Director of Special Education: Keith Smith **Phone:** 304/348-2034

SIG Mailing Address: Capitol Complex
Building #6, Room B-315
Charleston, WV 25305

Periods of SIG Funding: 1979-1981

State Legislation for Special Education Services:
Mandated: 5 to 23 years
Permissive: 3 to 4 years

Major SIG Objectives and Purposes for 1980-1981:
- To continue coordinating public and private agencies serving handicapped children aged birth to 5.
- To develop a model for integrating services locally.
- To develop ECSE program guidelines and a monitoring document.
- To develop the Comprehensive Plan for Personnel Development for ECSE, including preservice and inservice.

Features and Products:
The SIG has developed ECSE teacher competencies, using a statewide Task Force; these competencies will be approved in 1981 as certification standards. In addition, the SIG has assisted two local communities in producing standards, recommendations and implementation strategies for interagency activities.

WISCONSIN

SIG Director:	Betty Rowe	**Phone:** 608/266-6981
SIG Coordinator:	Jim McCoy Jenny Lange	**Phone:** 608/266-9615
State Director of Special Education:	Victor Contrucci	**Phone:** 608/266-1649
SIG Mailing Address:	Wisconsin Department of Public Instruction Division for Handicapped Children 125 South Webster Street, 4th Floor Madison, WI 53702	
Periods of SIG Funding:	1976-1981	

State Legislation for Special Education Services:
Mandated: 3 to 21 years
Permissive: birth to 3 years

Major SIG Objectives and Purposes for 1980-1981:
- To develop a comprehensive statewide plan for the delivery of educational services to handicapped children aged birth to 2 years.
- To facilitate the execution of specific state agreements relative to educational service mandates and the statewide plan with a realistic differentiation of service costs and responsibilities across agencies.
- To provide technical assistance to administrators, special education teachers and related professionals regarding educational services to handicapped children under the age of 3 years.

Features and Products:
The Wisconsin SIG has developed two products for assessment and intervention: Formal Assessment Instruments for Exceptional Children Under Five and Out of the Nest. For the Wisconsin EC:EEN programs, the SIG has produced a 24-minute slide-tape presentation of family involvement, Teaming Up With Parents and Teaching EC:EEN, a print presentation of ten resource modules: screening, assessment, curriculum, instruction, instructional materials, family involvement, paraprofessionals and volunteers, interagency cooperation, administration aspects and self-improvement.

RESEARCH ON THE EARLY ABILITIES OF CHILDREN WITH HANDICAPS (PROJECT REACH)

Address: UCLA Department of Education
405 Hilyard Avenue
Los Angeles, CA 90024

Phone: 213/825-8381

Fiscal Agency: University of California, Los Angeles

Directors: Barbara K. Keogh & Claire B. Kopp

Major Objectives:

REACH's long-term goal is to characterize competence of handicapped and at-risk children between 1 and 6 years of age. Since individual variability in competence characterizes this group of children, as it does others, it is essential to delineate the development of variability and the factors that mediate effectiveness. This delineation is the focus of many REACH studies.

Major Activities:

Project REACH is conducting studies in three areas: Infancy, Preschool, and the effects of a handicapping condition over time. The infancy studies focus on attention and self control in young children, while the preschool studies focus on temperament, social development, attention, attribution and motivation in young children. As findings emerge, dissemination activities will increase; dissemination will be a major emphasis in 1980-81.

Accomplishments During 1980:

Initial results in the infancy studies indicate an age progression in the use of sustained attention and self control, predictive individual variability and differential patterns of responses for normally developing and handicapped infants. In the preschool studies, the REACH investigators have further differentiated and refined techniques and elaborated specific research questions. In addition, these investigators have effected increasing coordination and integration of activities among the four major study areas of the preschool research program -- temperament, attribution, motivation and social competence. In the longitudinal study, REACH staff have collected several sets of data on the first cohort and are well into the collection of data on the second cohort.

Dissemination activities at REACH have measurably increased, and a REACH publications list is available for distribution. Dissemination activities directed toward parents and clinicians have continued through newsletter and local radio announcements. A brochure outlining available staff speakers is currently in progress, and Project REACH hosted a mini inter-Institute conference on dissemination.

Resources Available:

- "A Bibliography of Screening and Assessment Measures for Infants" by Kim L. Johnson and Claire B. Kopp, a 36-page bound booklet for use by staff
- A REACH Publication List is available for other REACH publications

KANSAS RESEARCH INSTITUTE FOR THE EARLY CHILDHOOD EDUCATION OF THE HANDICAPPED (EARLY CHILDHOOD INSTITUTE)

Address: The Institute is a collaborative effort of two departments:

Department of Human Development
130 Haworth Hall
University of Kansas
Lawrence, KS 66045
Phone: 913/864-4840

Department of Special Education
377 Haworth Hall
University of Kansas
Lawrence, KS 66045
Phone: 913/864-4954

Fiscal Agency: University of Kansas

Directors: Judith M. LeBlanc & Edward L. Meyen

Coordinators: Ann Rogers-Warren, Research Coordinator; Barbara Gentry, Coordinator of Development

Major Objectives:

The major emphasis of the Institute is to develop or improve methods of identifying and intervening with children at risk for a handicapping condition. The Institute's research is united by a common question: Why do some children develop successfully and others do not? Researchers are seeking to identify 1) what characteristics or patterns of behavior in a child might serve as signals that the child needs intervention, 2) how the child's environment affects his or her development, and 3) how procedures for documenting and assessing the child's progress can be developed. In addition, the Institute is integrating the findings from all the studies.

Major Activities:

To fulfill its objectives, the Early Childhood Institute is conducting research in the following four areas:

1. Developmental Guides to Intervention: developmental and environmental correlates of receptive language in the first year of life (Horowitz).
   - Instrument procedures sensitive to small increments in sensory/motor acquisition for normal and severely handicapped infants and young children (Guess and Rues).
2. Ecological Guides to Intervention: child-family interactions associated with the etiology and remediation of family dysfunction (L. Embry).
   - Child-child interaction, including the social variables affecting the play behaviors of handicapped and nonhandicapped children (Peterson).
   - Development of social skills in handicapped preschool children (Cooper).
   - Child-teacher interactions, their patterns, content and modification (Allen).
   - Child-setting interactions, including the transition from therapeutic to normal classrooms (Baer, Rowbury, and D. Embry).
   - Strategies used by mothers of handicapped, at-risk and normal children to teach language (Rogers-Warren).
3. Assessment Guides to Intervention
   - Assessment-guided intervention based on a discrimination learning model (Etzel).
   - Role of instructional variables in identifying, prescribing and implementing optimal teacher procedures (LeBlanc).
4. Integrated Research
   - Relationships among eco-behavioral and demographic measures obtained by Institute investigators (Foster and Ruggles).
   - The Institute is conducting longitudinal studies in the following areas: receptive language in infants, parent-child interactions in the home, sensorimotor development in SMH and normal infants and children, and verbal interactions between mothers and their children.

Accomplishments During 1980:

The Institute has completed Volume I in the series "Quantitative Assessment of Motor and Sensory/Motor Acquisition in Handicapped and Nonhandicapped Infants and Young Children". The 474-page manual, Assessment Procedures for Selected Developmental Milestones, describes the measurement of motor and sensorimotor acquisition in the following areas: visual behaviors (fixation, tracking and scanning); reach, grasp, release and transfer skills; head control; sitting behaviors; and mobility behaviors (rolling, crawling and creeping, and standing and walking).

A number of completed studies have produced findings in the following areas: 1) receptive language development (infant attention to intonation contour, infant attention to facial features, integration of audio-visual displays); 2) the relationship between neonatal behavior and environmental interactions; 3) the ability of preschool children to perform number-numeral correspondence tasks in various formats; 4) the behavioral effects of storybooks on normal, at-risk and handicapped children; 5) measurement of visual scanning by normal, retarded and at-risk children; and 6) various aspects of reading assessment and intervention (resulting in new procedures for children who do not acquire chaining skills or word identification skills).

Staff members have presented at professional conferences on the following topics: group parent training, receptive language in infants, language generalization, social interaction of normal and handicapped children, transition and follow-up techniques for children entering public school from a special classroom, errorless learning procedures, assessment of at-risk and handicapped infants, and teaching techniques for increasing positive social interactions of disruptive children.

Resources Available:

- Training and/or workshops on neonatal assessment, designing effective parent programs, academic programming for handicapped preschool children and language remediation for preschool children
- Comprehensive literature reviews on the following topics: receptive language of infants, social variables affecting early development, physical and ecological variables, direct instructional procedures, design criteria for instructional materials, learning assessment, instructional control variables, dissemination of research findings, infant operant conditioning and motor development of severely and multiply handicapped children
- Series of working-paper publications
- Consultative services on child management (individual and group)
- Observational codes (classroom and home-based) developed at the Institute
- Strategies for the management of research data
- Nontechnical articles describing various programs and research at the Institute
- Practical paper series
- Bibliographies

Specific information on products and services is available from the Institute.

INSTITUTE FOR THE STUDY OF EXCEPTIONAL CHILDREN

Address: The Institute is a collaborative effort of two research-service organizations:

Institute for the Study
of Exceptional Children
Educational Testing Service
Princeton, NJ 08541
Phone: 609/734-1056

St. Lukes-Roosevelt Medical Center
Department of Pediatrics
428 West 59th Street
New York, NY 10019

Fiscal Agency: Educational Testing Service (ETS)

Directors: Michael Lewis, Director of Institute

Coordinators: Jeanne Brooks-Gunn, Associate Director/Coordinator of Research Unit; Nathan Fox, Coordinator of Detection Unit; Richard Brinker, Coordinator of Intervention Unit; Louis Z. Cooper, Chairman of Pediatrics Department, St. Lukes-Roosevelt Medical Center

Major Objectives:

The Institute is designed to meet the growing need for productive and effective solutions to the problems of handicapped and at-risk children and consists of four units: detection, research, intervention and evaluation, and products and delivery. In 1981, the Institute will continue to develop effective techniques for the early identification of children at risk for developmental dysfunction and to design broader and more sensitive assessment tools for use with known handicapped children. An ongoing activity is to collect information on the development of normal, handicapped and at-risk infant populations.

As part of the intervention and evaluation unit, the Institute is developing effective methods of intervention with handicapped infants and conducting a systematic evaluation of those methods already developed. Furthermore, the Institute will continue to measure the relationship between the handicapped infant's development and the child's larger environment.

Dissemination activities for the Institute include developing media materials on handicapped and at-risk development for use by pediatricians, special parents and educators of dysfunctional infants. Materials will be made available on the educational and intervention techniques developed at the Institute, and the staff will continue to be involved in workshops and conferences.

Major Activities:

At St. Lukes-Roosevelt Medical Center, the Institute staff is conducting a longitudinal study of infants with low birth weights in order to detect those at risk. In addition, the Institute staff is collecting data on the cognitive and social development of handicapped infants and data on their socioemotional, perceptual-cognitive and linguistic functions. Other activities are to develop complex communicative skills from existing skills of young handicapped children, to evaluate integrated educational services for severely handicapped children and to apply research knowledge about normal infant development to handicapped infants. As part of its training program, the Institute will continue to teach predoctoral and postdoctoral students.

Dissemination activities for the Institute include developing two films on handicapped and at-risk children for use by pediatricians, parents and educators. The Institute staff is completing the data gathering for the Competency Assessment Profile, preparing curriculum modules based on that profile and designing procedures for its use. Furthermore, the Institute is developing intervention programs and curricula around process ("Learning to Learn") skills for parents and teachers.

Accomplishments During 1980:

The Institute staff have developed a number of curricula and contingency products for use with handicapped infants and their parents. Among these are: 1) a Handbook on the Competency Assessment Project, 2) contingency devices for use with the "Learning to Learn" Curriculum within Intervention Unit, 3) contingency products for use with handicapped infants, and 4) The Handicapped Infant: New Directions in Research and Intervention (Michael Lewis and Jeanne Brooks-Gunn, McGraw Hill, in press). The Institute staff are also active in disseminating research results or reports at professional meetings and have participated in 15 special education conferences, several Inter-institute meetings and presentations at ten medical centers and pediatric departments. In addition, the staff conducted a lecture series on special education and early childhood at Educational Testing Service.

Research completed to date includes the collection and analysis of data for the Competency Assessment Profile project, analysis of data collected to determine the interrelationship of skills as a function of both age and diagnostic category and the collection of data on 90 high-risk infants through the first year of life in the Identification Project. Data collection on neonates in the Identification Project has begun. As part of the Research Unit, the Institute staff have completed studies on linguistic, socioemotional, attentional and contingency skills.

Resources Available:

The following are available from Michael Lewis or Jeanne Brooks-Gunn, Institute for the Study of Exceptional Children, Educational Testing Service, Princeton, NJ 08541:

- Programs and Projects: Institute for the Study of Exceptional Children
- List of Institute Publications
- Selected Institute Reprints

CAROLINA INSTITUTE FOR RESEARCH ON EARLY EDUCATION FOR THE HANDICAPPED (CIREEH)

Address: Frank Porter Graham Center
Highway 54, 071A
Chapel Hill, NC 27514

Phone: 919/966-4121

Fiscal Agency: Frank Porter Graham Child Development Center

Principal Investigator: James Gallagher

Assistant Directors/Coordinator: Craig Ramey and Rune Simeonsson, Assistant Directors; Jean Gowen, Coordinator

Major Objectives:

CIREEH's major objectives are to develop a curriculum for severely and multiply handicapped infants developmentally aged birth to twelve months, to create new approaches for assessing the developmental progress of moderately, severely and multiply handicapped children and to assess the effectiveness of two types of intervention programs for children at risk for environmentally caused mental retardation. In addition, the Institute is conducting research to understand further how interventionists can best help families of handicapped and at-risk children facilitate their children's education. This research comprises projects which attempt to clarify both theoretical and operational definitions of preschool mainstreaming, to identify characteristics of mainstreamed preschool children and to understand parental perspectives on these programs. Through research units, CIREEH staff will study parent involvement with preschool programs, and they will examine the network of family relationships that influence the adaptive behavior of the high-risk and handicapped child as well as the relationship of that child's family with education programs. Finally, CIREEH intends to identify the characteristics of successful parents of young handicapped children and the support systems used by those families.

Major Activities:

During 1980, CIREEH continued to study the education of young handicapped children and children at risk for mild handicaps. Efforts included intervention and descriptive studies and the development of curriculum materials and assessment techniques.

The Carolina Approach to Responsive Education (Project CARE) is comparing the effects of two types of early education on the development of children at risk for mild mental retardation due to environmental factors. The project randomly assigned families to a home education group, a home education plus day care group and a control group. The day care group attends a full day, five-day-a-week developmental program. A home visitor provides parent education during biweekly visits. All three groups receive nutritional supplements. The project assesses mother-child interaction and child progress on a regular basis. The Curriculum Development project is developing and testing a curriculum for moderately, severely and multiply handicapped infants developmentally aged birth to 24 months.

Beyond these projects, CIREEH descriptive studies are examining a wide range of factors thought to affect the early education of handicapped children. Research topics include parent involvement in preschool programs for handicapped children; characteristics of families of children at risk for environmentally caused mental retardation; the roles and characteristics of parents in mainstreamed programs; the assessment of moderately, multiply and severely handicapped children; the relationship of family characteristics to adaptive behavior in the classroom; and characteristics and support systems of successful parents of handicapped children. CIREEH staff are also developing instruments and techniques for assessing a number of child and family characteristics.

Accomplishments During 1980:

CIREEH pilot tested the curriculum for moderately, severely and multiply handicapped infants developmentally aged birth to 12 months, and it is presently field testing the curriculum at developmental centers. This curriculum is available in pre-publication draft form for research validation. The Institute is pilot testing the curriculum for similarly handicapped toddlers, developmental ages 12 to 24 months.

CIREEH completed and pilot tested an experimental form of the Carolina Record of Infant Behavior (CRIB) for assessing and predicting the development of severely handicapped infants. CIREEH developed experimental forms to assess the social assets of handicapped children, parental concepts about infant development, parental information needs, family roles and the cognitive development of severely and multiply handicapped children. Also available are experimental forms of measures designed to survey parent involvement in preschool programs and the characteristics of mainstreamed programs.

CIREEH prepared a 1980 Status Report on preliminary results from the studies of parent involvement in preschool programs for handicapped children, mother-child interaction, characteristics of mainstreamed preschool programs, sources of support for parents of handicapped children, and the relationship between characteristics of families and classroom behavior.

Resources:

- Carolina Curriculum for Handicapped Infants (birth to 12 months
- Carolina Record of Infant Behavior: Experimental Form
- CIREEH Status Report: Technical report on the Carolina Institute for Research on Early Education for the Handicapped
- CIREEH Abstracts: List of publications available from the Carolina Institute for Research on Early Education for the Handicapped

TECHNICAL ASSISTANCE DEVELOPMENT SYSTEM (TADS)

Address: 500 NCNB Plaza
Chapel Hill, NC 27514

Phone: 919/967-9221

Administrative/Fiscal Agency: Frank Porter Graham Child Development Center
University of North Carolina, Chapel Hill

Director: Pascal Trohanis

Services Available:

TADS provides technical assistance to HCEEP Demonstration and State Implementation Grant (SIG) projects in the states and territories east of the Mississippi River excluding Illinois, Mississippi and Wisconsin. TADS maintains contact with and provides general information to Outreach projects and the Early Childhood Research Institutes within the same geographic region. In FY 1980-81, TADS serves 53 demonstration projects and 13 SIGs.

TADS coordinates technical assistance services through a central staff located in Chapel Hill, North Carolina, and draws on a bank of consultants and other resources throughout the country in order to meet the needs of its client programs. Each program's staff and TADS jointly assess the program's needs and agree upon plans for services designed specifically to address those needs. Technical assistance services for demonstration projects may address areas such as program planning, evaluation, curriculum development, services to children, parent involvement, staff development, demonstration and dissemination, continuation funding and project administration. For SIGs, technical assistance is available in the areas of program development and management, evaluation, personnel training, interagency cooperation and coordination and communication/dissemination.

Products Available:

Over the past ten years, TADS has developed many publications as a part of its technical assistance services. A complete product listing of books, monographs, bibliographies and manuals is available from TADS. Recent publications include: Perspectives on Measurement: A Collection of Readings for Educators of Young Handicapped Children (1979); Finding and Educating the High-risk and Handicapped Infant (1980); The Young Black Exceptional Child: Providing Programs and Services (1980); Planning Services for Young Handicapped American Indian and Alaska Native Children (1980); and Serving Young Handicapped Children in Rural America (1980). TADS, in cooperation with WESTAR, produced the 1978-79, 1979-80 and 1980-81 editions of the HCEEP Overview and Directory; Issues of Common Concern: A Report of the HCEEP Minority Leadership Workshop (1979); and Program Strategies for Cultural Diversity: Proceedings of the 1980 HCEEP Minority Leadership Workshop (1980). TADS, in cooperation with the U.S. Office of Special Education, produced A Practical Guide to Institutionalizing Educational Innovations (1981).

WESTERN STATES TECHNICAL ASSISTANCE RESOURCE (WESTAR)

Fiscal Agency: University of Washington
215 University District Building
1107 N.E. 45th Street, JD-06
Seattle, WA 98105
Phone: 206/543-8565

Administrative Agency: Teaching Research
345 North Monmouth Avenue
Monmouth, OR 97361
Phone: 503/838-1220 ext. 391

Principal Investigators: Norris G. Haring, University of Washington; H. D. (Bud) Fredericks, Teaching Research; James Galloway, National Association of State Directors of Special Education

Project Director: Geronimo Dominguez

Services Available:

WESTAR, a consortium of the University of Washington, the Teaching Research Division of the Oregon State System of Higher Education, and the National Association of State Directors of Special Education, provides technical assistance to HCEEP Demonstration and State Implementation Grant projects in the states and territories west of the Mississippi River plus Illinois, Mississippi and Wisconsin. In FY-81, WESTAR serves 47 demonstration projects and 12 state implementation grants. In addition, WESTAR maintains contact and shares information with Outreach programs, Early Childhood Research Institutes and other technical assistance agencies.

WESTAR provides its technical assistance through various modes in a number of program areas. Demonstration projects receive assistance in the areas of services for children, services for parents, staff development, demonstration/dissemination, administration and evaluation. WESTAR staff provides services on-site or select consultants to provide on-site services. In addition to individual consultation, WESTAR offers a variety of topical workshops for projects and supplements additional project needs with publications or by coordinating site visits to successful projects. State implementation grant projects receive assistance in the areas of program development and management, personnel training, interagency cooperation, communication/dissemination and evaluation. Services provided to SIG projects include assistance through topical workshops, publications, on-site consultation, visitation to other SIG sites and information searches.

Products Available:

WESTAR has developed a number of publications and products for distribution to the HCEEP network. A publications brochure is available which lists all WESTAR-developed products to date. Among the most recently published documents are Evaluating Handicapped Children's Early Education Programs (1980), What's Where? A Catalog of Products Developed by HCEEP Projects (1980), Public and Private Funding Alternatives (1980) and Cost Accounting and Accountability: For Early Education Programs for Handicapped Children (1980). In cooperation with TADS, WESTAR has developed a slide-tape program, Starting at the Beginning, and has published Program Strategies for Cultural Diversity (1980), the proceedings of the 1980 Minority Leadership Workshop.

HCEEP Project Listing

The HCEEP Project Listing includes all HCEEP projects funded by OSE during 1980-81 -- demonstration, outreach, state implementation grants, early childhood research institutes and technical assistance centers. Within each division, projects appear alphabetically by state, city and project name. The assigned numbers should assist readers in locating abstracts and using this index.

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1 AMERICAN SAMOA, PAGO PAGO
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2 ARIZONA, TEMPE
Education Center for Hearing Impaired Infants, Preschool Children and Their Parents

3 ARIZONA, TEMPE
Early Childhood Education for the Severely/Multiply Handicapped (ECE-SMH Center)

4 CALIFORNIA, CARMICHAEL
Criterion Teaching Program

5 CALIFORNIA, FAIRFIELD
Me Too Program

6 CALIFORNIA, LOS ANGELES
Pasadena Area Special Infant Toddler Project

7 CALIFORNIA, LOS ANGELES
UCLA Intervention Program

8 CALIFORNIA, OAKLAND
Intensive Care Nursery Interact Project

9 CALIFORNIA, ROHNERT PARK
Pediatric Intervention Program

10 CALIFORNIA, SAN FRANCISCO
Center for Education of Infant Deaf (CEID)

11 CALIFORNIA, SAN FRANCISCO
San Francisco Infant Program

12 CALIFORNIA, SAN FRANCISCO
SHINE Project

13 COLORADO, ALAMOSA
Project CATCH (Computers to Aid and Teach Children with Handicaps)

14 COLORADO, BOULDER
PRIDE Program (Parent Resources for Infant Development and Enrichment)

15 COLORADO, DENVER
Music Oriented Intervention Program

16 COLORADO, FT. COLLINS
Classroom Approach for Linguistically Impaired Preschoolers (CALIP)

17 COLORADO, GRAND JUNCTION
Junction Early Education Programs (JEEPS)

18 CONNECTICUT, BRIDGEPORT
Early Childhood Psycho-Educational Intervention Program

19 CONNECTICUT, BRIDGEPORT
Mainstreaming And Rehabilitating Children with Handicaps (MARCH)

20 CONNECTICUT, PLAINVILLE
Learning About Developmental Delays and Early Remediation (LADDER)

21 D.C., WASHINGTON
Early Intervention for Premature Infants and Their Adolescent Mothers

22 D.C., WASHINGTON
Interdisciplinary Model for Parent And Child Training (IMPACT)

23 D.C., WASHINGTON
Living Stage Improvisational Theatre Demonstration Project for Orthopedically Handicapped Children Ages Three to Eight

24 D.C., WASHINGTON
Therapeutic-Educational Day Care for Infants (TEDI)

25 D.C., WASHINGTON
Training and Infant Intervention Program (TIIP)

26 FLORIDA, MIAMI
Comprehensive Care to High-Risk Handicapped Newborn and Family

27 FLORIDA, ORLANDO
Echo-Parent/Infant Education Project (ECHO-PIE)

28 GEORGIA, ATLANTA
UNIsensory Project

29 GEORGIA, THOMASVILLE
Child-Family-Community (C-F-C)

30 HAWAII, HONOLULU
Family Centered Care for Infants At High Risk of Developmental Disabilities

31 IDAHO, MOSCOW
Educational Services for Rural Infants and Children

32 ILLINOIS, CHICAGO
Early Intervention Project (EIP)

33 ILLINOIS, CHICAGO
HI-MAPS Project (A Model for Hearing-Handicapped Infants Providing Medical, Academic and Psychological Services)

34 ILLINOIS, MAYWOOD
Pre-Start - A Family Focused Model of Services for High-Risk Infants

35 ILLINOIS, WEST CHICAGO
Project TRACE (Transitional Resource Addressing Children's Education)

36 INDIANA, BLOOMINGTON
Monroe County Multicategorical Model Preschool

37 IOWA, MARSHALLTOWN
Project FINIS (Families with Infants in Network of Interactional Support)

38 KANSAS, KANSAS CITY
A Transdisciplinary Approach to the Education of Severely/Multiply Handicapped Preschool Children

39 KANSAS, PARSONS
The S-E-KAN Project - An Interactive Curriculum Model for Providing Comprehensive Educational Services to Handicapped Infants, Preschool Children and Their Families in a Rural Area

40 KENTUCKY, LEXINGTON
Eastern Kentucky Coalition for the Handicapped

41 KENTUCKY, LOUISVILLE
Early Education Program for Down's Syndrome Infants and Children

42 LOUISIANA, NEW ORLEANS
Children's Center Infant Development Program

43 LOUISIANA, NEW ORLEANS
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48 MASSACHUSETTS, WATERTOWN
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50 MICHIGAN, WESTLAND
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51 MISSISSIPPI, COLUMBUS
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52 MISSISSIPPI, PHILADELPHIA
Handicapped Children's Early Education Program

53 MISSISSIPPI, PICAYUNE
Pearl River Infant Project

54 MISSOURI, COLUMBIA
Early Intervention Program

55 MISSOURI, ST. LOUIS
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56 MONTANA, MISSOULA
Big Sky Early Education Center

57 NEW JERSEY, GLASSBORO
Preschool Supermarket

58 NEW JERSEY, MONTCLAIR
Cognitive Linguistic Intervention Program (CLIP)

59 NEW MEXICO, ALBUQUERQUE
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61 NEW YORK, BROOKLYN
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63 NEW YORK, FLUSHING
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64 NEW YORK, JAMESTOWN
Parent Involvement Program (PIP)

65 NEW YORK, NEW YORK
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66 NEW YORK, NORTH MASSAPEQUA
Early Childhood Intervention Program

67 NEW YORK, POTSDAM
Early Intervention Program

68 NEW YORK, YORKTOWN HEIGHTS
A Regional Demonstration Program for Preschool Handicapped Children

69 NORTH CAROLINA, DURHAM
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70 NORTH CAROLINA, GREENSBORO
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71 OHIO, AKRON
Project for Motor Impaired Infants and Their Families

72 OHIO, COLUMBUS
Pediatric Education Project

73 OHIO, TOLEDO
Preschool Conductive Hearing Impairment Language Development (Preschool CHILD)

74 OKLAHOMA, TULSA
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75 OREGON, EUGENE
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76 OREGON, PORTLAND
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77 PENNSYLVANIA, ERIE
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78 PENNSYLVANIA, NORRISTOWN
Infant/Family Project

79 PENNSYLVANIA, PHILADELPHIA
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80 PENNSYLVANIA, PITTSBURGH
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81 PUERTO RICO, HATO REY
Early Education Opportunities for Preschool Handicapped Children

82 RHODE ISLAND, FOSTER
Severely Handicapped Communication Program

83 RHODE ISLAND, PROVIDENCE
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84 SOUTH CAROLINA, HARLEYVILLE
Harleyville Early Learning Program (HELP)

85 TENNESSEE, COLUMBIA
Early Lifestyle Program Demonstration Project

86 TENNESSEE, MEMPHIS
Technical Educational Center for Children with Handicaps (Project TEACH)

87 TENNESSEE, NASHVILLE
Family, Infant and Toddler Project (FIT)

88 TEXAS, DENTON
Child Success Through Parent Training

89 TEXAS, FORT WORTH
Teaching Concepts for Autistic Children

90 TEXAS, HOUSTON
Project Transition

91 TEXAS, SAN ANTONIO
A PEPPY KIDS Project

92 TEXAS, SILSBEE
Project Search

93 UTAH, SALT LAKE CITY
Utah Program for Autistic Children

94 VERMONT, RUTLAND
Model Child Development Project for Severely Handicapped Children Ages Birth to Five Years

95 VIRGINIA, HAMPTON
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96 VIRGINIA, RICHMOND
Richmond Early Childhood Education Project (RECEP)

97 WASHINGTON, EVERETT
Providence Project

98 WASHINGTON, SEATTLE
Northwest Center Infant/Toddler Development Program

99 WASHINGTON, SPOKANE
The Model Preschool Project

100 WEST VIRGINIA, MORGANTOWN
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102 CALIFORNIA, LOS ANGELES
Early Childhood Education Reverse Mainstream Project

103 CALIFORNIA, OAKLAND
Parent Infant Outreach Project

104 CALIFORNIA, SAN DIEGO
Early On: Outreach II

105 CALIFORNIA, SAN FRANCISCO
Project MORE (Mainstreamed Outreach and Resources for Education)

106 COLORADO, BOULDER
INREAL/Outreach

107 D.C., WASHINGTON
Project UPSTART

108 GEORGIA, ATHENS
Rutland Center Developmental Therapy Model Outreach Project

109 GEORGIA, ATLANTA
Family Intervention Project - Outreach (FIP)

110 ILLINOIS, CHAMPAIGN
Precise Early Education for Children with Handicaps (PEECH Project)

111 ILLINOIS, CHAMPAIGN
Retrieval and Acceleration of Promising Young Handicapped and Talented (RAPYHT)

112 ILLINOIS, MACOMB
Macomb 0-3 Regional Project: A Rural Child/Parent Service

113 ILLINOIS, PEORIA
Peoria 0-3 Outreach Project

114 ILLINOIS, ROCKFORD
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115 INDIANA, MUNCIE
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116 KENTUCKY, MURRAY
Project for Early Education of Exceptional Children (PEEEC)

117 KENTUCKY, OWENSBORO
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118 MAINE, MACHIAS
Washington County Children's Program Outreach Project

119 MASSACHUSETTS, DEDHAM
Early Recognition Intervention Network Outreach Program (ERIN)

120 MASSACHUSETTS, MEDFORD
Learning in Integrated Classrooms (LINC Outreach)

121 MASSACHUSETTS, QUINCY
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122 MICHIGAN, YPSILANTI
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123 MINNESOTA, ST. PAUL
Early Education Outreach

124 MISSISSIPPI, JACKSON
Early Education Center Outreach Project

125 MISSISSIPPI, OXFORD
Project RUN/Outreach

126 MISSOURI, ST. LOUIS
Central Institute for the Deaf Early Education Project

127 MONTANA, BILLINGS
Project Sunrise Outreach

128 NORTH CAROLINA, CHAPEL HILL
Chapel Hill Training-Outreach Project

129 OHIO, CINCINNATI
Infant Stimulation/Mother Training

130 OREGON, BEAVERTON
Project SHAPE - Adaptive Education for Severely/Profoundly Handicapped

131 OREGON, MONMOUTH
Teaching Research Infant and Child Center Data-Based Classroom

132 PENNSYLVANIA, READING
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133 RHODE ISLAND, FOSTER
Education for Severely Handicapped Outreach Program

134 SOUTH CAROLINA, COLUMBIA
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135 TENNESSEE, NASHVILLE
Regional Intervention Program Expansion Project (RIP)

136 TEXAS, AUSTIN
ADAPT Project

137 TEXAS, DALLAS
Project KIDS

138 TEXAS, LUBBOCK
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139 TEXAS, WICHITA FALLS
PEECH Outreach

140 UTAH, LOGAN
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141 UTAH, LOGAN
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142 VIRGINIA, CHARLOTTESVILLE
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143 VIRGINIA, LIGHTFOOT
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144 VIRGINIA, NORFOLK
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145 WASHINGTON, SEATTLE
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146 WISCONSIN, PORTAGE
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147 WISCONSIN, WAUWATOSA
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148 WYOMING, LARAMIE
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150 ARIZONA, PHOENIX

151 CALIFORNIA, SACRAMENTO

152 CONNECTICUT, HARTFORD

153 D.C., WASHINGTON

154 GEORGIA, ATLANTA

155 KANSAS, TOPEKA

156 LOUISIANA, BATON ROUGE

157 MAINE, AUGUSTA

158 MARYLAND, BALTIMORE

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160 MISSOURI, JEFFERSON CITY

161 MONTANA, HELENA

162 NEVADA, LAS VEGAS

163 NEW YORK, ALBANY

164 NORTH CAROLINA, RALEIGH

165 OHIO, WORTHINGTON

166 OKLAHOMA, OKLAHOMA CITY

167 SOUTH DAKOTA, PIERRE

168 U.S. - VIRGIN ISLANDS, ST. CROIX

169 VIRGINIA, RICHMOND

170 WASHINGTON, OLYMPIA

171 WEST VIRGINIA, CHARLESTON

172 WISCONSIN, MADISON

EARLY CHILDHOOD RESEARCH INSTITUTES

173 CALIFORNIA, LOS ANGELES
UCLA Research Institute

174 KANSAS, LAWRENCE
Kansas Research Institute for the Early Childhood Education of the Handicapped (Early Childhood Institute)

175 NORTH CAROLINA, CHAPEL HILL
Carolina Institute for Research on Early Education for the Handicapped (CIREEH)

176 NEW JERSEY, PRINCETON
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TECHNICAL ASSISTANCE CENTERS

177 NORTH CAROLINA, CHAPEL HILL
Technical Assistance Development System (TADS)

178 OREGON, MONMOUTH
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Index

The Index serves as a key to specific demographic and operating information about the HCEEP projects. A list of identification numbers for projects follows each descriptor. Demonstration projects, Outreach projects and State Implementation Grants are listed in the Index.

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